#### Case:19-01022-ESL11 Doc#:1 Filed:02/26/19 Entered:02/26/19 23:17:05 Desc: Main Document Page 1 of 54

Fi	ll in this information to ide	ntify your case:	
Ur	nited States Bankruptcy Cour	rt for the:	
DI	STRICT OF PUERTO RICO		
Ca	se number (if known)	Chapter 1	1
			☐ Check if this an amended filing
	ficial Form 201		
V	oluntary Petit	ion for Non-Individuals Filin	g for Bankruptcy 4/16
if m For	ore space is needed, attac more information, a separ	h a separate sheet to this form. On the top of any addition ate document, <i>Instructions for Bankruptcy Forms for No</i>	
1.	Debtor's name	PUERTO RICO HOSPITAL SUPPLY, INC.	
2.	All other names debtor used in the last 8 years		
	Include any assumed names, trade names and doing business as names		
3.	Debtor's federal Employer identification Number (EIN)	66-0388425	
4.	Debtor's address	Principal place of business	Mailing address, if different from principal place of business
		BARRIO MARTIN GONZALEZ CARR 860 KM 0.1 Carolina, PR 00986-0158	CALL BOX 158 Carolina, PR 00986-0158
		Number, Street, City, State & ZIP Code	P.O. Box, Number, Street, City, State & ZIP Code
		Carolina County	Location of principal assets, if different from principal place of business
			Number, Street, City, State & ZIP Code
	Debtor's website (URL)		
	Type of debtor	Corporation (including Limited Liability Company (LLC)	and limited Lieblik, Dada and Carlo
		Partnership (excluding LLP)	and Limited Liability Partnership (LLP))
		- I ardiarant (excloding ELP)	

# Case:19-01022-ESL11 Doc#:1 Filed:02/26/19 Entered:02/26/19 23:17:05 Desc: Main Document Page 2 of 54

Debt	PUERTO RICO HOS	PITAL SUPPLY, INC	Case number (# known)
7.	Describe debtor's business	Health Care Busin Single Asset Real Railroad (as defin Stockbroker (as d Commodity Broke Clearing Bank (as None of the above B. Check all that appl Tax-exempt entity Investment advisor	
	Under which chapter of the Bankruptcy Code is the debtor filing?	Check one Chapter 7 Chapter 9 Chapter 11. Check	Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).  The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  A plan is being filed with this petition.  Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
ti y If	Were prior bankruptcy cases filed by or against the debtor within the last 8 rears? If more than 2 cases, attach a reparate list.	No.  Yes.  District  District	When Case number When Case number
p b ar Li	Are any bankruptcy cases ending or being filed by a susiness partner or an filliate of the debtor? ist all cases. If more than 1, ttach a separate list	No Yes.  Debtor District	Relationship When Case number, if known

#### Case:19-01022-ESL11 Doc#:1 Filed:02/26/19 Entered:02/26/19 23:17:05 Desc: Main Document Page 3 of 54

Debtor	PUERTO RICO HO	SPITAL	SUPPLY, IN	Ç.	Case number (if kno	own)
	Why is the case filed in his district?	Check a	ill that apply			
.,	ns district?	Di pr	ebtor has had receding the d	its domicile, princ ate of this petition	ipal place of business, or principal asse or for a longer part of such 180 days th	ets in this district for 180 days immediately
					btor's affiliate, general partner, or partne	
12. D	oes the debtor own or ave possession of any	■ No				
re P	eal property or personal roperty that needs	☐ Yes.	Answer belo	w for each proper	ty that needs immediate attention. Attac	ch additional sheets if needed.
in	nmediate attention?		Why does t	he property need	I immediate attention? (Check all that	apply.)
			lt poses		se a threat of imminent and identifiable	
				Contratedian	cured or protected from the weather.	
			☐ It include	s perishable good		e or lose value without attention (for example,
			Other	coasonal goods, i	neat, daily, produce, or securities-relate	ed assets or other options).
			Where is th	e property?		
					Number, Street, City, State & ZIP Coo	ie
			Is the prope	rty insured?	·	
			□ No			
			Yes. Ins	surance agency		
				ontact name		
				ione		
si -u	Statistical and admini	strative in	formation			
	btor's estimation of allable funds		heck one:			
			Funds will be	e avallable for dist	ribution to unsecured creditors.	
			After any ad	ministrative expen	ses are paid, no funds will be available	to unsecured creditors.
	timated number of	☐ 1-49			☐ 1,000-5,000	<b>25,001-50,000</b>
		50-99 100-19	20		□ 5001-10,000	<u> </u>
		200-99			□ 10,001-25,000	☐ More than100,000
5. Es	timated Assets	□ \$0 - \$5	50,000		□ \$1,000,001 - \$10 million	□ \$500,000,004, #4 bitt
		\$50,00	1 - \$100,000		□ \$10,000,001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion
		\$100,0	001 - \$500,000	י	■ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion
		□ \$500,0	101 - \$1 millior	1	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
6. Est	lmated liabilities	□ \$0 - \$5			□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
			01 - \$100,000		■ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			01 - \$500,000 01 - \$1 millior		☐ \$50,000,001 - \$100 million	\$10,000,000,001 - \$50 billion
		□ \$5000 0	U1 - 31 million	1	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion

#### Case:19-01022-ESL11 Doc#:1 Filed:02/26/19 Entered:02/26/19 23:17:05 Desc: Main Document Page 4 of 54

Debtor	PUERTO RICO HO	OSPITAL SUPPLY, INC.		Case number (if known)	
	Request for Relief, D	eclaration, and Signatures			
WARNIN	G Bankruptcy fraud i imprisonment for t	s a serious crime. Making a false statement up to 20 years, or both. 18 U.S.C. §§ 152, 13	in connection with a 341, 1519, and 3571	a bankruptcy case can result in fines up to	\$500,000 or
of au	ration and signature thorized sentative of debtor		with the chapter of tit	itle 11, United States Code, specified in thi	s petition.
				asonable belief that the information is true	d and correct.
		I declare under penalty of perjury that the	foregoing is true and	d correct.	
	x	Executed on 62/26/20/MM/DD/YYYY		FELIX B. SANTOS	
		Signature of authorized representative of	debtor	Printed name	
		Title PRESIDENT			
18. Signat	cure of attorney X	Signature of attorney for debtor		Date 2/26/19 MM / DD / YYYY	
		ALEXIS FUENTES-HERNANDEZ			
		Printed name  FUENTES LAW OFFICES Firm name			
		PO BOX 90227266			
		San Juan, PR 00902-2726 Number, Street, City, State & ZIP Code			
		Contact phone <b>787-722-5215</b>	Email address	ALEX@FUENTESLAW.COM	
		USDC-PR 217201 PR			
		Bar number and State			

Fill in this information to identify the case:	
Debtor name PUERTO RICO HOSPITAL SUPPLY, INC.	
United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO	
Case number (if known)	☐ Check if this is an
	amended filing
Official Form 202	
Declaration Under Penalty of Perjury for Non-Inc	dividual Debtors 12/15
An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation orm for the schedules of assets and liabilities, any other document that requires a declaration the imendments of those documents. This form must state the individual's position or relationship that the date. Bankruptcy Rules 1008 and 9011.  VARNING Bankruptcy fraud is a serious crime. Making a false statement, concealing property connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 2519, and 3571.	nat is not included in the document, and any to the debtor, the identity of the document,
Declaration and signature	
I am the president, another officer, or an authorized agent of the corporation; a member or an auth Individual serving as a representative of the debtor in this case.	horized agent of the partnership; or another
I have examined the information in the documents checked below and I have a reasonable belief	that the information is true and correct:
☐ Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)	
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)  Schedule H: Codebtors (Official Form 206H)	
Schedule H: Codebtors (Official Form 206H)  Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)	
Amended Schedule	
Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Cl	laims and Are Not Insiders (Official Form 204)
Other document that requires a declaration	and the first metaers (official Form 204)
I declare under penalty of perjury that the foregoing is true and correct.	
Executed on $\frac{62/36/30/9}{x}$ $\frac{1}{2}$	
Signature of individual signing on behalf of del	btor
FELIX B. SANTOS	
Printed name	
PRESIDENT	

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

Position or relationship to debtor

Official Form 206D  Schedule D: Creditors Who Have Claims Secured by Property  Se as complete and accurate as possible.  Do any creditors have claims secured by debtor's property?  No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report  Yes. Fill in all of the Information below.  Partist List Creditors Who Have Secured Claims  List Creditors Who Have Secured Claims  List Creditors who have secured claims. If a creditor has more than one secured claim that the creditor separately for each claim.  Do not deduct the value of collateral.  SECURED BY UCC FILINGS OVER INVENTORIES AND ACCOUNTS RECEIVABLE.  Describe the lien  Describe the lien	lumn 8 lue of collateral t supports this
Case number (if known)  Check amen  Official Form 206D  Checkedule D: Creditors Who Have Claims Secured by Property  as a complete and accurate as possible.  Do any creditors have claims secured by debtor's property?  No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report  Yes. Fill in all of the Information below.  Column A  Amount of claim  Validating, list the creditor separately for each claims. If a creditor has more than one secured laim, list the creditor separately for each claim.  BANCO SANTANDER DE PR  Describe debtor's property that is subject to a lien  SECURED BY UCC FILINGS OVER INVENTORIES AND ACCOUNTS  RECEIVABLE.  Describe the lien	nded filing  12/  rt on this form.
Difficial Form 206D Schedule D: Creditors Who Have Claims Secured by Property  as a complete and accurate as possible.  Do any creditors have claims secured by debtor's property?  No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report  Yes. Fill in all of the Information below.  But Its List Creditors Who Have Secured Claims  List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured aim, list the creditor separately for each claim.  Do not deduct the value of collateral.  Describe debtor's property that is subject to a lien  SECURED BY UCC FILINGS OVER INVENTORIES AND ACCOUNTS  RECEIVABLE.  Describe the lien  Creditor's mailing address  Describe the lien	nded filing  12/  rt on this form.
Official Form 206D Schedule D: Creditors Who Have Claims Secured by Property  as a complete and accurate as possible.  Do any creditors have claims secured by debtor's property?  No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report  Yes. Fill in all of the Information below.  Arrett: List Creditors Who Have Secured Claims  List In alphabetical order all creditors who have secured claims. If a creditor has more than one secured aim, list the creditor separately for each claim.  Do not deduct the value of collateral.  Describe debtor's property that is subject to a lien  SECURED BY UCC FILINGS OVER INVENTORIES AND ACCOUNTS RECEIVABLE.  Describe the lien	nded filing  12/  rt on this form.
e as complete and accurate as possible.  Do any creditors have claims secured by debtor's property?  No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report Yes. Fill in all of the Information below.    Column A   Column A	rt on this form. Iumn B Iue of collateral t supports this
Do any creditors have claims secured by debtor's property?  No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report Yes. Fill in all of the Information below.    Arctical List Creditors Who Have Secured Claims	rt on this form. Iumn B Iue of collateral t supports this
Do any creditors have claims secured by debtor's property?  No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report yes. Fill in all of the information below.    Yes. Fill in all of the information below.	lumn 8 lue of collateral t supports this
No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report the Yes. Fill in all of the Information below.    Art 1:   List Creditors Who Have Secured Claims	lumn 8 lue of collateral t supports this
List Creditors Who Have Secured Claims  List In alphabetical order all creditors who have secured claims. If a creditor has more than one secured aim, list the creditor separately for each claim.  BANCO SANTANDER DE PR  Creditor's Name  PONCE DE LEON AVENUE FLOOR 7  San Juan, PR 00917-1818  Creditor's mailing address  Column A  Amount of claim  Validate of collateral.  Describe debtor's property that is subject to a lien  \$24,793,912.51  \$2  SECURED BY UCC FILINGS OVER  INVENTORIES AND ACCOUNTS  RECEIVABLE.  Describe the lien	lumn 8 lue of collateral t supports this
Part 1: List Creditors Who Have Secured Claims  List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured laim, list the creditor separately for each claim.  BANCO SANTANDER DE PR  Creditor's Name PONCE DE LEON AVENUE FLOOR 7 San Juan, PR 00917-1818 Creditor's mailing address  Column A  Column A  Mmount of claim Do not deduct the value of collateral.  \$24,793,912.51 \$2  SECURED BY UCC FILINGS OVER INVENTORIES AND ACCOUNTS RECEIVABLE.  Describe the lien	ue of collateral
List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured laim, list the creditor separately for each claim.  BANCO SANTANDER DE PR Creditor's Name PONCE DE LEON AVENUE FLOOR 7 San Juan, PR 00917-1818 Creditor's mailing address  Column A Amount of claim Value of collateral.  SECURED BY UCC FILINGS OVER INVENTORIES AND ACCOUNTS RECEIVABLE.  Describe the lien	ue of collateral
BANCO SANTANDER DE PR Creditor's Name PONCE DE LEON AVENUE FLOOR 7 San Juan, PR 00917-1818 Creditor's mailing address  Amount of claim Do not deduct the value of collateral.  SECURED BY UCC FILINGS OVER INVENTORIES AND ACCOUNTS RECEIVABLE. Describe the lien	ue of collateral
BANCO SANTANDER DE PR Creditor's Name PONCE DE LEON AVENUE FLOOR 7 San Juan, PR 00917-1818 Creditor's mailing address  Describe the lien  SECURED BY UCC FILINGS OVER INVENTORIES AND ACCOUNTS RECEIVABLE.  Describe the lien	t supports this
BANCO SANTANDER DE PR  Creditor's Name PONCE DE LEON AVENUE FLOOR 7 San Juan, PR 00917-1818 Creditor's mailing address  Describe the lien  Do not deduct the value of collateral.  \$24,793,912.51  \$2  \$24,793,912.51	
PR Creditor's Name  PONCE DE LEON AVENUE FLOOR 7 San Juan, PR 00917-1818 Creditor's mailing address  Describe debtor's property that is subject to a lien \$24,793,912.51 \$2  SECURED BY UCC FILINGS OVER INVENTORIES AND ACCOUNTS RECEIVABLE.  Describe the lien	
PONCE DE LEON AVENUE FLOOR 7 San Juan, PR 00917-1818 Creditor's mailing address  SECURED BY UCC FILINGS OVER INVENTORIES AND ACCOUNTS RECEIVABLE.  Describe the lien	24,973,912.5
FLOOR 7 San Juan, PR 00917-1818 Creditor's mailting address  Pescribe the lien	
Creditor's mailing address Describe the lien	
BANK LOANS	
is the creditor an insider or related party?	
■ No	
Creditor's email address, if known	
Is anyone else liable on this claim?  Date debt was incurred	
140	
Last 4 digits of account number  Yes. Fill out Schedule H: Codebtors (Official Form 206H)	
Do multiple croditors have an As of the petition filling date, the claim is:	
interest in the same property?  Check all that apply  Contingent	
☐ Yes. Specify each creditor, ☐ Unliquidated	
including this creditor and its relative Disputed priority.	

#### Case:19-01022-ESL11 Doc#:1 Filed:02/26/19 Entered:02/26/19 23:17:05 Desc: Main Document Page 7 of 54

Fill in this information to identify the case:  Debtor name PUERTO RICO HOSPITAL S	CURPLY INC.		
United Co. 1. D. 4.			
-	CT OF PUERTO RICO		
Case number (if known)			
		☐ Check	if this is an ed filing
Official Form 206E/F		arrond.	ou ming
Schedule E/F: Creditors Wi	an Hava III		
He as complete and accurate as noscible Head and the			12/15
Personal Property (Official Form 2084/R) and on Cala-	or creditors with PRIORITY unsecured claims and Part 2 for cred kpired leases that could result in a claim. Also list executory con dule G: Executory Contracts and Unexpired Leases (Official Fort Part 1 or Part 2, fill out and attach the Additional Page of that Par	tracts on Schedule A/B:	f unsecured claim Assets - Real and tries in Parts 1 and
		Marian Company	
<ol> <li>Do any creditors have priority unsecured clain</li> <li>No. Go to Part 2.</li> </ol>	ns? (See 11 U.S.C. § 507).		
Yes Go to line 2.			
<ol><li>List in alphabetical order all creditors who ha with priority unsecured claims, fill out and attach</li></ol>	ve unsecured claims that are entitled to priority in whole or in pa the Additional Page of Part 1.	art. If the debtor has more  Total claim	than 3 creditors
2.1 Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
	As of the pention filling date, the claim is:	00.00	<b>\$0.00</b>
DEPARTMENT OF TREASURY	Check all that apply	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX)	Check all that apply ☐ Contingent	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140	Check all that apply ☐ Contingent ☐ Unliquidated	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B	Check all that apply ☐ Contingent	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140	Check all that apply ☐ Contingent ☐ Unliquidated ☐ Disputed	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140	Check all that apply ☐ Contingent ☐ Unliquidated	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140	Check all that apply Contingent Unliquidated Disputed Basis for the claim:	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY  Is the claim subject to offset?	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (a)	Check all that apply Contingent Unliquidated Disputed  Basis for the claim; NOTICE ONLY  Is the claim subject to offset? NO Yes	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (f)	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY  Is the claim subject to offset? No Yes  As of the petition filing date, the claim is:	\$0.00	\$0.00
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (f)  Priority creditor's name and mailing address DEPARTMENT OF TREASURY	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY  Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply.		
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (f)	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY  Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply. Contingent		
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (g)  Priority creditor's name and mailing address DEPARTMENT OF TREASURY (IVU) PO BOX 9024140 OFFICE 424B	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY  Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated		
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (g)  Priority creditor's name and mailing address DEPARTMENT OF TREASURY (IVU) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY  Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply. Contingent		
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (g)  Priority creditor's name and mailing address DEPARTMENT OF TREASURY (IVU) PO BOX 9024140 OFFICE 424B	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY  Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated		
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (g)  Priority creditor's name and mailing address DEPARTMENT OF TREASURY (IVU) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY  Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed  Basis for the claim:		
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (f)  Priority creditor's name and mailing address DEPARTMENT OF TREASURY (IVU) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY  Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY		
DEPARTMENT OF TREASURY (INCOME TAX) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (B)  2.2 Priority creditor's name and mailing address DEPARTMENT OF TREASURY (IVU) PO BOX 9024140 OFFICE 424B San Juan, PR 00902-4140 Date or dates debt was incurred	Check all that apply Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY  Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed  Basis for the claim: NOTICE ONLY		

## Case:19-01022-ESL11 Doc#:1 Filed:02/26/19 Entered:02/26/19 23:17:05 Desc: Main Document Page 8 of 54

Debtor	PUERTO RICO HOSPITAL SUPPLY	Y, INC. Case number (if known)		
	Priority creditor's name and mailing address INTERNAL REVENUE SERVICE CITY VIEW PLAZA II 48 CARR 165 SUITE 200 Guaynabo, PR 00968	As of the petition filing date the claim is:  Check all that apply.  Contingent Unliquidated Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: NOTICE ONLY		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	■ No □ Yes		
	Priority creditor's name and mailing address MUNICIPAL REVENUE COLLECTION CENTER PO BOX 195387 San Juan, PR 00919-5387	As of the petition filing date, the claim is:  Check all that apply:  Contingent  Unliquidated  Disputed	\$915,593.55	\$0.00
	Date or dates debt was incurred 2017	Basis for the claim: PERSONAL PROPERTY TAXES		
1	ast 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY insecured claim: 11 U.S.C. § 507(a) (8)	■ No □ Yes		
) 1	Priority creditor's name and mailing address MUNICIPIO DE FAJARDO PO BOX 7346 APARTADO 865 Fajardo, PR 00738	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: NOTICE ONLY		
L	ast 4 digits of account number	Is the claim subject to offset?	-	
8	pecify Code subsection of PRIORITY	■ No		
u	nsecured claim: 11 U.S.C. § 507(a) (8)	□Yes		
F	riority creditor's name and mailing address PR DEPARMENT OF LABOR PO BOX 195540 Ian Juan, PR 00919-5540	As of the petition filing date, the claim is:  Check all that apply.  Contingent  Unliquidated  Disputed	\$0.00	\$0.00
D	ate or dates debt was incurred	Basis for the claim: NOTICE ONLY		
L	ast 4 digits of account number	is the claim subject to offsel?	-0.0	
S	pecify Code subsection of PRIORITY needed to the subsection of PRIORITY (8)	No ☐ Yes		

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Obout Salary Contingent  Date(s) debt was incurred Lest 4 digits of account number  Salary Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset?  No Yes  As of the petition filing date, the claim is: Check all that apply.  \$106.  Contingent Unliquidated Unliquidated Unliquidated Date(s) debt was incurred  Basis for the claim: INVENTORY  \$106.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY	
STATE INSURANCE FUND CORPORATION CORPORATION PO BOX 365028 San Juan, PR 00936-5028  Date or dates debt was incurred  Basis for the claim: NOTICE ONLY  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim. 11 U.S.C § 507(a) (8) Yes  Post 2: List All Creditors with NONPRIORITY Unsecured Claims 3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. Investigation filling date, the claim is: Check all that apply.  \$10	
CORPORATION PO BOX 365028 San Juan, PR 00936-5028  Date or dates debt was incurred  Basis for the claim: NOTICE ONLY  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured Claims 3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 cr	
PO BOX 365028  San Juan, PR 00936-5028  Date or dates debt was incurred  Basis for the claim: NOTICE ONLY  Last 4 digits of account number Unsecured claims: Us the claim subject to offset?  Specify Code subsection of PRIORITY Unsecured claims: 11 U.S.C § 507(a) (g)  Port 2: List All Creditors with NONPRIORITY Unsecured Claims 3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims unter an experiment of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims in the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsec	
San Juan, PR 00936-5028  Date or dates debt was incurred  Basis for the claim: NOTICE ONLY  Last 4 digits of account number  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C § 507(a) (B)  Pert 2:  List All Creditors with NONPRIORITY Unsecured Claims  3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. Inventory  \$1.0	
Date or dates debt was incurred  Basis for the claim: NOTICE ONLY  Last 4 digits of account number Specify Code subsection of PRIORITY Unsecured claim: 11 U.S.C § 507(a) (8)  Port 2: List All Creditors with NONPRIORITY Unsecured Claims 3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims and attach the Additional Page of Part 2.  Amount of the creditor's name and mailing address BMEDICAL, INC 799 OVERLOOK DR Winter Haven, FL 33884 Date(a) debt was incurred Last 4 digits of account number Basis for the claim: INVENTORY Last 4 digits of account number  Basis for the claim: INVENTORY Last 4 digits of account number  Basis for the claim: INVENTORY Last 4 digits of account number Basis for the claim: INVENTORY Last 4 digits of account number Basis for the claim: INVENTORY Last 4 digits of account number Basis for the claim: INVENTORY Last 4 digits of account number Basis for the claim: INVENTORY Last 4 digits of account number Basis for the claim: INVENTORY Last 4 digits of account number Basis for the claim: INVENTORY Last 4 digits of account number Basis for the claim: INVENTORY Last 4 digits of account number Basis for the claim: INVENTORY Last 4 digits of account number Basis for the claim: INVENTORY Last 4 digits of account number Disputed Date(a) debt was incurred Disputed Date(a) debt was incurred Disputed Date(a) debt was incurred Disputed Basis for the claim: INVENTORY	
Last 4 digits of account number   Is the claim subject to offset?  Specify Code subsection of PRIORITY   Is the claim subject to offset?  Specify Code subsection of PRIORITY   Insecured Claims   Investment   Inves	
Last 4 digits of account number  Specify Code subsection of PRIORITY Unsecured claim: 11 U.S.C § 507(e) (B)  Part 2: List All Creditors with NONPRIORITY Unsecured Claims  3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims and mall in additional Page of Part 2.  Amount of 6  3.1 Nonpriority creditor's name and malling address 3B MEDICAL, INC 799 OVERLOOK DR Winter Haven, FL 33884 Dets(s) dobt was incurred Last 4 digits of account number  Basis for the claim: INVENTORY Is the claim subject to offset?  No   Yes  3.2 Nonpriority creditor's name and malling address 3M CORPORATE PO BOX 844127 Daties) dobt was incurred Last 4 digits of account number  Basis for the claim: INVENTORY Is the claim subject to offset? No   Yes  3.3 Nonpriority creditor's name and malling address 3M DE PR, INC. PO BOX 70286 San Juan, PR 00936 Date(s) dobt was incurred Basis for the claim: INVENTORY Is the claim subject to offset? No   Yes  As of the petition filing date, the claim is: Check all that apply. \$106.  \$107 Contingent \$108 Contingent \$109 Conti	
Specify Code subsection of PRIORITY unsecured claim. 11 U.S.C § 507(a) (B)	
PRIT 2: List All Creditors with NONPRIORITY Unsecured Claims  3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims in the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims in the debtor has more than 6 creditors with nonpriority unsecured claims in the debtor has more than 6 creditors with nonpriority unsecured claims in the debtor has more than 6 creditors with nonpriority unsecured claims in the debtor has more than 6 creditors with nonpriority claims. School and in the property of the clai	
Part 2: List All Creditors with NONPRIORITY Unsecured Claims  3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims.  Amount of 6 and 1 and	
3.1 Nonpriority creditor's name and mailing address As of the petition filling date, the claim is: Check all that apply.  3.1 Nonpriority creditor's name and mailing address As of the petition filling date, the claim is: Check all that apply.  3.2 Nonpriority creditor's name and mailing address 3M CORPORATE PO BOX 844127 Date(s) debt was incurred Last 4 digits of account number Last 4 digits of account number  Sasis for the claim: INVENTORY Last 4 digits of account number Last 4 digits of account number Last 4 digits of account number  Sasis for the claim: INVENTORY Last 4 digits of account number  Sasis for the claim: INVENTORY Last 4 digits of account number  Sasis for the claim: INVENTORY Last 4 digits of account number Sasis for the claim: INVENTORY	
3.1 Nonpriority creditor's name and mailing address As of the petition filling date, the claim is: Check all that apply.  3.1 Nonpriority creditor's name and mailing address As of the petition filling date, the claim is: Check all that apply.  3.2 Nonpriority creditor's name and mailing address 3M CORPORATE PO BOX 844127 Date(s) debt was incurred Last 4 digits of account number Last 4 digits of account number  Sasis for the claim: INVENTORY Last 4 digits of account number Last 4 digits of account number Last 4 digits of account number  Sasis for the claim: INVENTORY Last 4 digits of account number  Sasis for the claim: INVENTORY Last 4 digits of account number  Sasis for the claim: INVENTORY Last 4 digits of account number Sasis for the claim: INVENTORY	
3.1   Nonpriority creditor's name and mailing address   As of the petition filing date, the claim is: Check all that apply.   \$10   3.1   3.2   Nonpriority creditor's name and mailing address   As of the petition filing date, the claim is: Check all that apply.   \$10   As of the petition filing date, the claim is: Check all that apply.   \$10   As of the petition filing date, the claim is: Check all that apply.   \$3   Nonpriority creditor's name and mailing address   As of the petition filing date, the claim is: Check all that apply.   \$3   \$3   Nonpriority creditor's name and mailing address   As of the petition filing date, the claim is: Check all that apply.   \$3   \$3   Nonpriority creditor's name and mailing address   As of the petition filing date, the claim is: Check all that apply.   \$106   \$3   \$3   \$3   \$3   \$3   \$3   \$3   \$	ims, fill
3B MEDICAL, INC 799 OVERLOOK DR Winter Haven, FL 33884  Dete(s) debt was incurred Lest 4 digits of account number  3.2 Nonpriority creditor's name and mailing address 3M CORPORATE PO BOX 844127 Dallas, TX 75284-4127 Date(s) debt was incurred Lest 4 digits of account number  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  3.3 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  \$30 Sale (a) debt was incurred Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  3.3 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  \$106 Unliquidated Disputed  Date(s) debt was incurred Basis for the claim: INVENTORY Basis for the claim is: Check all that apply.  \$106 Disputed Basis for the claim: INVENTORY	
3B MEDICAL, INC 799 OVERLOOK DR Winter Haven, FL 33884  Dete(s) debt was incurred Lest 4 digits of account number  3.2 Nonpriority creditor's name and mailing address 3M CORPORATE PO BOX 844127 Dallas, TX 75284-4127 Date(s) debt was incurred Lest 4 digits of account number  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  3.3 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  \$30 Sale (a) debt was incurred Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  3.3 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  \$106 Unliquidated Disputed  Date(s) debt was incurred Basis for the claim: INVENTORY Basis for the claim is: Check all that apply.  \$106 Disputed Basis for the claim: INVENTORY	700 05
799 OVERLOOK DR Winter Haven, FL 33884  Dete(s) debt was incurred Lest 4 digits of account number  3.2 Nonpriority creditor's name and mailing address 3M CORPORATE PO BOX 844127 Dallas, TX 75284-4127 Date(s) debt was incurred Lest 4 digits of account number  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  As of the petition filling date, the claim is: Check all that apply.  \$3  Nonpriority creditor's name and mailing address Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  3.3 Nonpriority creditor's name and mailing address As of the petition filling date, the claim is: Check all that apply.  \$106  Contingent Disputed  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  3.3 Nonpriority creditor's name and mailing address As of the petition filling date, the claim is: Check all that apply.  \$106  Unliquidated Disputed  Disputed  Basis for the claim: INVENTORY  S106  Basis for the claim: INVENTORY  Basis for the claim: INVENTORY	/88.65
Disputed  Date(s) debt was incurred Last 4 digits of account number  3.2 Nonpriority creditor's name and mailing address 3M CORPORATE PO BOX 844127 Date(s) debt was incurred Last 4 digits of account number Last 4 digits of account number  3M Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check ell that apply.  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  3.3 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check ell that apply.  \$106.  Contingent Disputed  Basis for the claim: INVENTORY  Last 4 digits of account number Basis for the claim: INVENTORY  Last 4 digits of account number Basis for the claim: INVENTORY	
Date(s) debt was incurred Last 4 digits of account number    Sals for the claim: INVENTORY	
Some count number   Is the claim subject to offset?   No   Yes	
3.2   Nonpriority creditor's name and mailing address   As of the petition filing date, the claim is: Check all that apply.   \$3	
3M CORPORATE PO BOX 844127 Dallas, TX 75284-4127 Date(s) debt was incurred Last 4 digits of account number  3.3 Nonpriority creditor's name and mailing address 3M DE PR, INC. PO BOX 70286 San Juan, PR 00936 Date(s) debt was incurred Last 4 digits of account number  Contingent Unliquidated Disputed  As of the petition filing date, the claim is: Check all that apply.  \$106.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY  \$106.	
3M CORPORATE PO BOX 844127 Dallas, TX 75284-4127 Date(s) debt was incurred Lest 4 digits of account number  Sam De PR, INC. PO BOX 70286 San Juan, PR 00936 Date(s) debt was incurred Lest 4 digits of account number  Sals for the claim: INVENTORY Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply.  \$106. Disputed  Basis for the claim: INVENTORY  \$106.  San Juan, PR 00936 Date(s) debt was incurred Lest 4 digits of account number	729.60
PO BOX 844127 Dallas, TX 75284-4127 Date(s) debt was incurred Lest 4 digits of account number  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  3.3 Nonpriority creditor's name and mailing address  As of the petition filing date, the claim is: Check all that apply.  \$106 Contingent PO BOX 70286 San Juan, PR 00936 Date(s) debt was incurred Last 4 digits of account number	20.00
Date(s) debt was incurred	
Date(s) debt was incurred Lest 4 digits of account number  Is the claim: INVENTORY Is the claim subject to offset? No Yes  3.3 Nonpriority creditor's name and mailing address  As of the petition filing date, the claim is: Check all that apply.  \$106.  Contingent PO BOX 70286 San Juan, PR 00936 Date(s) debt was incurred Lest 4 digits of account number	
Last 4 digits of account number    Sals for the claim; INVENTORY   Is the claim subject to offset?   No   Yes	
Is the claim subject to offset? No Yes  3.3 Nonpriority creditor's name and mailing address  3M DE PR, INC.  PO BOX 70286  San Juan, PR 00936  Date(s) debt was incurred  Last 4 digits of account number    San Description filing date, the claim is: Check all that apply. \$106.    Contingent   Unliquidated	
3M DE PR, INC.  PO BOX 70286  San Juan, PR 00936  Date(s) debt was incurred  Lest 4 digits of account number  Contingent  Unliquidated  Disputed  Basis for the claim: INVENTORY	
3M DE PR, INC.  PO BOX 70286  San Juan, PR 00936  □ Unliquidated  Date(s) debt was incurred  Last 4 digits of account number	168 92
PO BOX 70286  San Juan, PR 00936  Date(s) debt was incurred  Last 4 digits of account number  Disputed  Basis for the claim: INVENTORY	
Date(s) debt was incurred  Basis for the claim: INVENTORY  Basis for the claim: INVENTORY	
Date(s) debt was incurred	
Last 4 digits of account number	
la des alaba a della control de la	
Is the claim subject to offset? ■ No ☐ Yes	
3.4 Nonpriority creditor's name and mailing address  As of the petition filing date, the claim is: Check all that apply.	39.83
A.A.A.	00,00
PO BOX 768	
San Juan, PR 00916-7060	
Date(s) debt was incurred	
Last 4 digits of account number 7854	
Is the claim subject to offset? ■ No ☐ Yes	
3.5 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.	72.36
A.A.A.	. 2.50
PO BOX 70101	
San Juan, PR 00936-8101 —	
Data(s) debt was incurred	
Last 4 digits of account number	
Is the claim subject to offset? ■ No □ Yes	

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Debtor	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
36	Nonpriority creditor's name and mailing address	fig. of the model of the hands	
-	A.E.E.	As of the petition filing date, the claim is: Check all that apply	\$43,862.69
	PO BOX 363508	☐ Contingent	
	San Juan, PR 00936-3508	Unliquidated	
	Date(s) debt was incurred_	☐ Disputed	
	Last 4 digits of account number	Basis for the claim: UTILITIES - ELECTRICITY	
		Is the claim subject to offset? No Yes	
3.7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$101,441.09
	AC TECHNICAL SERVICES CORP	☐ Contingent	\$101,441,09
	URB. COUNTRY CLUB	☐ Unliquidated	
	803 CALLE MOLUCAS (AVE ITURREGUI)	☐ Disputed	
	San Juan, PR 00924	•	
	Date(s) debt was incurred	Basis for the claim: REPAIRS AND MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset? 📕 No 🔲 Yes	
3.8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$4.400.40
	ACCU-SCOPE INC	☐ Contingent	\$1,109.40
	73 MALL DR.	☐ Unliquidated	
•	Commack, NY 11725	☐ Disputed	
1	Date(s) debt was incurred _	•	
ı	Last 4 digits of account number	Basis for the claim: INVENTORY	
		is the claim subject to offset?	
3.9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$303,69
	ADLINK, INC	☐ Contingent	\$102.03
	PO BOX 362884	Unliquidated	
	San Juan, PR 00936-2884	☐ Disputed	
	Date(s) debt was incurred _	Basis for the claim: ADVERTISING	
L	Last 4 digits of account number	——————————————————————————————————————	
		Is the claim subject to offset?  No  Yes	
	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$4,261.29
_	ADP, INC	☐ Contingent	
	PO BOX 842854	☐ Unliquidated	
	Bostoп, MA 02284-2854	☐ Disputed	
	Date(s) debt was incurred _	Basis for the claim: PAYROLL SERVICES	
L	ast 4 digits of account number	Is the claim subject to offset?	
		is the claim subject to onser? No Li Yes	
	lonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$2,912.00
	ADVANCED FIRE PROTECTION	☐ Contingent	, , ,
	PO BOX 3971	☐ Unliquidated	
	Carolina, PR 00984-3971	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: MAINTENANCE	
L	ast 4 digits of account number _	Is the claim subject to offset? ■ No □ Yes	
2 42 144	la mada alta a a alta d		
	ionpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$105,245.60
A	ADVANCED MEDICAL DESIGNS	☐ Contingent	
1	241 ATLANTA INDUSTRIAL DRIVE	☐ Unliquidated	
	Marietta, GA 30066	☐ Disputed	
	ate(s) debt was incurred	Basis for the claim: INVENTORY	
Lı	ast 4 digits of account number	la de la companya de	
		Is the claim subject to offset?  No  Yes	

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Debtor PUERTO RICO HOSPITAL SUPPLY, INC	Case number (if known)	
3.13 Nonpriority creditor's name and mailing address		
AGROPHARMA LABS	As of the petition filing date, the claim is: Check all that apply	\$4,884.30
PO BOX 1150	Contingent	
Salinas, PR 00751	Unliquidated	
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset?	
3.14 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$0.44 <b>7.0</b> 4
ALCOR SCIENTIC, INC	☐ Contingent	\$6,447.25
20 THURBER BOULEVARD	☐ Unliquidated	
SMITHFIELD, RI 00291-7000	☐ Disputed	
Date(s) debt was incurred		
Last 4 digits of account number	Basis for the claim: <u>INVENTORY</u>	
	Is the claim subject to offset? ■ No ☐ Yes	
3.15 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	4750.00
ALPHA SCIENTIFIC CORP	Contingent	\$750.00
PO BOX 725	☐ Unliquidated	
Southeastern, PA 19399	☐ Disputed	
Date(s) debt was incurred	·	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset? ■ No ☐ Yes	
3.16 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	<b>\$0.050.40</b>
ALVARADO TAX & BUSINESS	□ Contingent	\$3,358.16
PO BOX 195598	☐ Unliquidated	
San Juan, PR 00919-5598	Disputed	
Date(s) debt was incurred	·	
Last 4 digits of account number	Basis for the claim: TAX CONSULTING SERVICES	
_	Is the claim subject to offset?  No Yes	
3.17 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	24 020 00
AMERICAN 3B SCIENTIFIC	Contingent	\$1,250.00
2189 FLINTONE DRIVE	☐ Unliquidated	
SUITE 0		
Tucker, GA 30084	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset?	
3.18 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
AMERICAN DIAGNOSTIC CORP	Contingent	\$892.11
55 COMMERCE DR.	☐ Unilquidated	
Hauppauge, NY 11788	_	
Date(s) debt was incurred _	☐ Disputed	
Last 4 digits of account number _	Basis for the claim: <u>INVENTORY</u>	
	is the claim subject to offset? 🏴 No 🔲 Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$07.074.C-
AMSINO	Contingent	\$97,871.25
708 CORPORATE CENTER DR.	☐ Unliquidated	
Pomona, CA 91768		
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: <u>INVENTORY</u>	
g, number	is the claim subject to offset? 🌉 No 🔲 Yes	

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Debtor	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (irknown)	
3 20	Nonpriority creditor's name and mailing address ANSELL HEALTHCARE PRODUCTS DEPT CH 17373 Palatine, IL 60055-7373	As of the petition filing date, the claim is: Check all that apply  Contingent  Unliquidated	\$51,625.00
	Date(s) debt was incurred	☐ Disputed	
	Last 4 digits of account number _	Basis for the claim: INVENTORY  Is the claim subject to offset? ■ No □ Yes	
12.04		is the define subject to bridge;	
	Nonpriority creditor's name and mailing address ANSELL SANDEL MEDICAL 19736 DEARBORN STREET Chatsworth, CA 91311 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply Contingent Unliquidated Disputed  Basis for the claim: INVENTORY  Is the claim subject to offset? No Yes	\$30,060.88
3 22	Name alorder and district		
	Nonpriority creditor's name and mailing address AQUA-GULD X-PRESS CALLE ALDEA #1258 EDIFICIO UNICA SUITE 300 San Juan, PR 00907	As of the petition filing date, the claim is: Check all that apply  Contingent Unliquidated Disputed	\$6,482.19
	Date(s) debt was incurred	Basis for the claim: FREIGHT	
	Last 4 digits of account number _	is the claim subject to offset?	
;	Nonpriority creditor's name and mailing address ASPEN SURGICAL PRODUCTS 3998 RELIABLE PARKWAY Chicago, IL 60686-0039	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed	\$44,785.82
	Date(s) debt was incurred Last 4 digits of account number	Basis for the claim: INVENTORY	
	east 4 digits of account number	Is the claim subject to offset? 📕 No 🔲 Yes	
1	Nonpriority creditor's name and mailing address AT&T MOBILITY PO BOX 6463 Carol Stream, IL 60197-6463 Date(s) debt was incurred	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: TELEPHONE	\$1,366.88
		Is the claim subject to offset? 📕 No 🔲 Yes	
1	Nonpriority creditor's name and mailing address AT&T MOBILITY PUERTO RICO PO BOX 70261 San Juan, PR 00936-8261 Date(s) debt was incurred	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed	\$2,393.29
L	ast 4 digits of account number 6124	Basis for the claim: TELEPHONE	
		Is the claim subject to offset?  No  Yes	
F	Nonpriority creditor's name and malling address AVALON PAPERS, LLC PO BOX 3967 Dshkosh, WI 54903-3967 Date(s) dabt was incurred	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY	\$0.01
	Total a second united	Is the claim subject to offset?	

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Debtor	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
8	Nonpriority creditor's name and mailing address AVANOS MEDICAL, INC 5405 WINDWARD PARKWAY SUITE 100 SOUTH	As of the petition filing date, the claim is: Check all that apply  ☐ Contingent ☐ Unliquidated ☐ Disputed	\$68,149.40
	Alpharetta, GA 30004	•	
	Date(s) debt was incurred Last 4 digits of account number	Basis for the claim: INVENTORY  Is the claim subject to offset? No Yes	
		is the definitional feet to offset?	
8 8 E	Nonpriority creditor's name and mailing address B BRAUN 824 TWELFTH AVE Bethlehem, PA 18018 Date(s) debt was incurred _ _ast 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply  Contingent  Unliquidated  Disputed  Basis for the claim: INVENTORY  Is the claim subject to offset?	\$1,038,031.64
3.29 N	Nonpriority creditor's name and mailing address	An of the mateting filling it to all the	
8 2 C	BD DIAGNOSTICS 21588 NETWORK PLACE Chicago, IL 60673-1215 Date(s) debt was incurred ast 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset?  No Yes	\$ <b>495,752.07</b>
B P C De	ionpriority creditor's name and mailing address BD MEDICAL SURGICAL SYSTEMS PO BOX 70942 Chicago, IL 60673-0942 ate(s) debt was incurred ast 4 digits of account number	As of the petition filing date, the claim is: Check all that apply  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes	\$857,165.59
Bi P( CI Da	onpriority creditor's name and mailing address D MICROBIOLOGY SYSTEM O BOX 70942 hicago, IL 60673 ste(s) debt was incurred _ set 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset?	\$199,299.20
Bi 22 Os Da	empriority creditor's name and mailing address EMIS COMPANY, INC 200 BADGER AVENUE shkosh, WI 54904 ate(a) debt was incurred ist 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset?	\$6.10
Bit 19 Ell Dat	onpriority creditor's name and mailing address IOSYNERGY, INC 340 E DEVON AVE & Grove Village, IL 60007 te(s) debt was incurred st 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset?	\$13,520.00

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Debtor	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3 34	Nonpriority creditor's name and mailing address	At of the notices Slive date the Line	
	BMF, INC	As of the petition filing date, the claim is: Check all that apply	\$636.00
	PO BOX 277	☐ Contingent	
	Caguas, PR 00725-0277	Unliquidated	
	Date(s) debt was incurred	☐ Disputed	
	Last 4 digits of account number	Basis for the claim: INVENTORY	
		Is the claim subject to offset? No 🔲 Yes	
3.35	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$304.80
	BOVIE MEDICAL CORPORATION	☐ Contingent	\$304.0i
	5115 ULMERTON ROAD	Unliquideted	
	Clearwater, FL 33760	☐ Disputed	
	Date(s) debt was incurred		
	Last 4 digits of account number	Basis for the claim: INVENTORY	
		Is the claim subject to offset?  No  Yes	
3.36	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$18,060.73
	BRACCO DIAGNOSTICS INC	□ Contingent	\$10,000.73
	PO BOX 978952	☐ Unliquidated	
	Dallas, TX 75397-8952	Disputed	
	Date(s) debt was incurred	·	
	Last 4 digits of account number	Basis for the claim: INVENTORY	
		Is the claim subject to offset? No 🔲 Yes	
3.37	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$4,232.00
	BRIGSS HEALTHCARE	Contingent	¥4,232.00
	4900 UNIVERSITY AVE	Unliquidated	
	SUITE 200	☐ Disputed	
'	West Des Moines, IA 50266	•	
I	Date(s) debt was incurred	Basis for the claim: <u>INVENTORY</u>	
	Last 4 digits of account number	is the claim subject to offset? Mo Yes	
3,38	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$158,449.67
	BSN MEDICAL, INC	□ Conlingent	ψ 130,443.07
- 1	PO BOX 751766	Unliquidated	
	Charlotte, NC 28275-1766	·	
	Date(s) debt was incurred	☐ Disputed	
	ast 4 digits of account number_	Basis for the claim: INVENTORY	
	= 1	is the claim subject to offset?	
3.39	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$44 225 00
(	CARDIAC SCIENCE CORPORATION	Contingent	\$14,235.00
	PO BOX 776401	Unliquidated	
(	Chicago, IL 60677-6401	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
L	ast 4 digits of account number		
		Is the claim subject to offset? Mo 🔲 Yes	
	ionpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$15,049.83
_	CARDINAL HEALTH PR 120	☐ Contingent	,
_	O BOX 366211	Unliquidated	
	San Juan, PR 00936-6211	☐ Disputed	
	Pate(s) debt was incurred	Basis for the claim: INVENTORY	
L	ast 4 digits of account number		
		Is the claim subject to offset?	

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Debtor PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
Nonpriority creditor's name and mailing address	As of the notation Silver date that the	
CARDINAL SCALE MFG CO	As of the petition filing date, the claim is: Check all that apply	\$5,990.60
203 EAST DAUGHTERY	☐ Contingent	
Webb City, MO 64870	Unliquidated	
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset?	
42 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	
CARDIOPULMONARY	Contingent	\$3,410.00
3002 N.W. 79 AVENUE	☐ Unliquidated	
Miami, FL 33166		
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number _	Basis for the claim: INVENTORY	
	Is the claim subject to offset? ■ No ☐ Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$2,959,27
CAREFUSION CORP	☐ Contingent	<b>4-1000.21</b>
25146 NETWORK PLACE	☐ Unliquidated	
Chicago, IL 60673	Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number 5408	Is the claim subject to offset?	
4 Nonpriority creditor's name and mailing address		
CARESTREAM HEALTH PUERTO RICO	As of the petition filing date, the claim is: Check all that apply.	\$905,081.01
PO BOX 70231	Contingent	
San Juan, PR 00936-8231	Unilquidated	
	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	le the claim subject to offset? ■ No □ Yes	
5 Nonpriority creditor's name and mailing address		
CARESTREAM HEALTH PUERTO RICO	As of the petition filing date, the claim is: Check all that apply	\$2,797.98
PO BOX 70231	Contingent ==	
San Juan, PR 00936-8231	Unliquidated	
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset?	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$6,480.42
CARIBE RECYCLING CORP	☐ Contingent	70,100172
PMC 20 HC-01	☐ Unliquidated	
BOX 29030	☐ Disputed	
Caguas, PR 00725-8900		
Date(s) debt was incurred	Basis for the claim: <u>SERVICES</u>	
Last 4 digits of account number _	Is the claim subject to offset?  No Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$9,243.00
CARLOS R. BARALT, PSC	☐ Contingent	-3.12.00
PO BOX 195103	☐ Unliquidated	
San Juan, PR 00919-5103	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: PROFESSIONAL SERVICES	
Last 4 digits of account number	Is the claim subject to offset?	

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Debtor PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3 48 Nonpriority creditor's name and mailing address	As of the methor filling date of	
CARSTENS HEALTH IND, INC	As of the petition filing date, the claim is: Check all that apply	\$4,212.9
PO BOX 99110	☐ Contingent	
Chicago, IL 60693	Unliquidated	
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset?  No Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$204.000.00
CASELLAS ALCOVER & BURGOS	☐ Contingent	\$284,909.8
PO BOX 364924	□ Unliquidated	
San Juan, PR 00936-4924	☐ Disputed	
Date(s) debt was incurred		
Last 4 digits of account number	Basis for the claim: PROFESSIONAL SERVICES	
	Is the claim subject to offset? ■ No ☐ Yes	
.50 Nonpriority creditor's name and mailing address CINCINNATI SUB-ZERO	As of the petition filing date, the claim is; Check all that apply.	\$50,277.50
12011 MOSTELLER ROAD	☐ Contingent	
Cincinnati, OH 45241	☐ Unliquidated	
	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number _	Is the claim subject to offset?	
.51 Nonpriority creditor's name and mailing address		
COLEGIO ADM DE SERVICIOS	As of the petition filing date, the claim is: Check all that apply.	\$5,000.00
	☐ Contingent	
Date(s) debt was incurred	☐ Unliquidated	
Last 4 digits of account number	☐ Disputed	
The state of account manager	Basis for the claim: SPONSOR	
	Is the claim subject to offset?	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$217.14
CONE INSTRUMENTS	☐ Contingent	
DEPT. 2465	☐ Unliquidated	
PO BOX 11407 Birmingham, AL 35246-2465	☐ Disputed	
	•	
Date(s) debt was incurred	Basis for the claim: <u>INVENTORY</u> Is the claim subject to offset? ■ No □ Yes	
	is the claim adoject to onset? — No	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$53,773.84
CONMED CORPORATION	☐ Contingent	700 110104
CHURCH STREET STATION	☐ Unliquideted	
PO BOX 6814 New York, NY 10249-6814	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset?	
Nonpriority creditor's name and mailing address		
COOPER SURGICAL	As of the petition filing date, the claim is: Check all that apply.	\$13,838.20
PO BOX 712280	☐ Contingent	
Cincinnati, OH 45271	Unliquidated	
	☐ Disputed	
Data(s) debt was Incurred		
Date(s) debt was incurred Last 4 digits of account number	Basis for the claim: INVENTORY	

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PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
.55 Nonpriority creditor's name and mailing address	As of the potition filling date the eletin to our days	
DESIGN VERONIQUE	As of the petition filing date, the claim is: Check all that apply	\$295.4
999 MARINA WAY SOUTH	☐ Contingent	
Richmond, CA 94804	Unliquidated	
	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset?	
56 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$255 546 44
DJ ORTHOPEDICS/ENCORE	☐ Contingent	\$203,248.14
PO BOX 650777	•	
Dallas, TX 75265-0777	Unliquidated	
Date(s) debt was Incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset?  No  Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$288.75
DLL FINANCIAL SERVICES	☐ Contingent	9 £00.10
PO BOX 41602	☐ Unliquidated	
Philadelphia, PA 19101-1602	☐ Disputed	
Date(s) debt was incurred	'	
Last 4 digits of account number 8708	Basis for the claim: SERVICES	
	Is the claim subject to offset? No Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$8,417.40
DQS MEDIZINPRODUKTE GMBH	☐ Contingent	
AUGUST-SCHANZ STR 21	Unliquidated	
60433 FRANKFURT A.M.	☐ Disputed	
FRANKFURT, DE	•	
Date(s) debt was incurred	Basis for the claim: CERTIFICATIONS	
Last 4 digits of account number	Is the claim subject to offset? No Yes	
9 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$836,26
DUARTE WASTE	☐ Contingent	,,,,,,,
PMB 1820 C/PARRIS 243	Unliquidated	
San Juan, PR 00917-3632	☐ Disputed	
Date(s) debt was Incurred	`	
Last 4 digits of account number	Basis for the claim: GARBAGE DISPOSAL	
	Is the claim subject to offset?	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$69,837.88
DYNAREX CORPORATION	☐ Contingent	
10 GLENSHAW STREET	☐ Unliquidated	
Orangeburg, NY 10962	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	la the claim subject to offset? No	
Manufaction and the state of th		
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$12,339.93
ECU WORLDWIDE	☐ Contingent	
2401 N.W. 69TH STREET	☐ Unliquidated	
Mlami, FL 33147	Disputed	
Date(s) debt was incurred	Basis for the claim: FREIGHT	
Last 4 digits of account number		
rest - digits of account lightness	Is the claim subject to offset? 📕 No 🔲 Yes	

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Debto	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3 62	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	40.007.0
	EJ TRANSPORT	_	\$9,625.0
	EXT SANTA MARIA	☐ Contingent	
	CALLE LIMONCILLO 17B	☐ Unliquidated	
	San Juan, PR 00927	☐ Disputed	
	Date(s) debt was Incurred	Basis for the claim: DIESEL	
	Last 4 digits of account number _	Is the claim subject to offset? ■ No ☐ Yes	
3 63	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$2,001.25
	EL HORREO DE V SUAREZ	☐ Contingent	Ψ2,001.20
	PO BOX 364588	Unliquidated	
	San Juan, PR 00936-4588	☐ Disputed	
	Date(s) debt was incurred _	Basis for the claim: WATER SERVICES	
	Last 4 digits of account number	Is the claim subject to offset?	
3.64	Nonpriority creditor's name and mailing address		
	ENVISION TECHNOLOGIES	As of the petition filing date, the claim is: Check all that apply.	\$4,039.50
	PMB 345	☐ Contingent	
	100 GRAN BULEVAR PASEOS	☐ Unliquidated	
	San Juan, PR 00926-5955	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: SYSTEMS MAINTENANCE	
	Last 4 digits of account number	Is the claim subject to offset?	
3.65	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$44.500.00
	ESB PUERTO RICO		\$14,523.80
	PO BOX 4825	☐ Contingent	
	Carolina, PR 00984-4825	Unliquidated	
	Date(s) debt was incurred	☐ Disputed	
	Last 4 digits of account number	Basis for the claim: REPAIRS	
	_	Is the claim subject to offset? I No Yes	
3 66	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$983.41
	EXIPO DESIGN	☐ Contingent	
	CORUJO INDUSTRIAL PARK	☐ Unliquidated	
	CALLE C #46 LOTE A-6	☐ Disputed	
	Bayamon, PR 00961	,	
	Date(s) debt was incurred _	Basis for the claim: LEASE	
	Last 4 digits of account number	Is the claim subject to offset? 📕 No 🔲 Yes	
3.67	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$868.44
	FACSIMILE PAPER CONN. CORP	☐ Contingent	
	PO BOX 363122	☐ Unliquidated	
	San Juan, PR 00936-3122	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: OFFICE SUPPLIES	
	Last 4 digits of account number	Is the claim subject to offset?	
.68	Nonpriority creditor's name and mailing address	As of the petition filling data, the claim to observe and	A46 B46
.68	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$13,799.52
.68	FASHION SEAL UNIFORM	☐ Contingent	\$13,799.52
.68	FASHION SEAL UNIFORM PO BOX 748000	☐ Contingent ☐ Unliquidated	\$13,799.52
1.68	FASHION SEAL UNIFORM PO BOX 748000 Cincinnati, OH 45274-8000	☐ Contingent	<u>\$13,799.52</u>
3.68	FASHION SEAL UNIFORM PO BOX 748000	☐ Contingent ☐ Unliquidated	<u>\$13,799.52</u>

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PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
Nonpriority creditor's name and mailing address	An of the political filling data the state of	
FEDERAL EXPRESS CORP	As of the petition filing date, the claim is: Check all that apply	\$5,887.8
PO BOX 371461	Contingent	
Pittsburgh, PA 15250-7461	Unliquidated	
• .	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: FREIGHT	
Last 4 digits of account number	Is the claim subject to offset?	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$5,247.00
FORDION PACKAGING LTD	☐ Contingent	
637 WYCOFF AVE. #335	Unliquidated	
Wyckoff, NJ 07481	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	· · · · · · · · · · · · · · · · · · ·	
	Is the claim subject to offset? No 🔲 Yes	
71 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$7,232.89
FPV & GALINDEZ	☐ Contingent	
PO BOX 364152	☐ Unliquidated	
San Juan, PR 00936-4152	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: ACCOUNTING SERVICES	
Last 4 digits of account number _	is the claim subject to offset? ■ No ☐ Yes	
72 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$62,762.70
FUSIONWORKS, INC	☐ Contingent	you, our c
#120 AVE CONDADO	Unliquidated	
EDIFICIO PICO CENTER, SUITE 102	☐ Disputed	
SAN JUAN, PR 00972-7550	Basis for the claim: SERVICES	
Date(s) debt was incurred Lest 4 digits of account number	ls the claim subject to offset? ■ No ☐ Yes	
73 Nonpriority creditor's name and mailing address GENDRON, INC	As of the petition filing date, the claim is: Check all that apply	\$1,950.00
DRAWER #1337	☐ Contingent	
PO BOX 5935	☐ Unliquidated	
Troy, MI 48007-5935	☐ Disputed	
• •	Basis for the claim: INVENTORY	
Date(s) debt was incurred _ Last 4 digits of account number _	Is the claim subject to offset? No Yes	
	As of the petition filing date, the claim is: Check all that apply	\$676.00
GENERAL PHYSIOTHERAPY, INC	☐ Contingent	
13222 LAKEFRONT DR	☐ Unliquidated	
Earth City, MO 63045-1504	☐ Disputed	
Date(s) debt was incurred _	Basis for the claim: INVENTORY	
Last 4 digits of account number _	Is the claim subject to offset? ■ No □ Yes	
7E No 16 16 16		
75 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,817.02
GENSTAR TECHNOLOGIES	☐ Contingent	
4525 EDISON AVE.	☐ Unliquidated	
Chino, CA 91710	☐ Disputed	
Date(s) debt was incurred _	Basis for the claim: INVENTORY	
Last 4 digits of account number _	Is the claim subject to offset?	

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Debtor	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (irknown)	
3.76	Nonpriority creditor's name and mailing address GENTELL	As of the petition filing date, the claim is: Check all that apply	\$13,970.80
	2701 BARTRAM RD	Contingent	
	Bristol, PA 19007	Unliquidated	
	Date(s) debt was incurred	☐ Disputed	
	Last 4 digits of account number _	Basis for the claim: INVENTORY	
		Is the claim subject to offset? Mo 🔲 Yes	
3 77	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$15,594.49
	GF HEALTH PRODUCTS, INC PO BOX 47510	☐ Contingent	
	Atlanta, GA 30362-0510	☐ Unliquidated	
		☐ Disputed	
	Date(s) debt was incurred Last 4 digits of account number	Basis for the claim: INVENTORY	
	Lost 4 digits of account number _	Is the claim subject to offset?	
3.78	Nonpriority creditor's name and mailing address	As of the petition filing data, the claim is: Check all that apply.	\$26,055.50
	GLOBAL HEALTHCARE	☐ Contingent	720,000.00
	11350 OLD ROSWELL ROAD	Unliquidated	
	SUITE 700	Disputed	
	Marletta, GA 30090	Basis for the claim: INVENTORY	
	Date(s) debt was incurred		
	Last 4 digits of account number	Is the claim subject to offset? No Yes	
	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$240.50
	GLOBAL MEDICAL PRODUCTS	☐ Conlingent	7.10.00
	PO BOX 881982	☐ Unliquidated	
	Port Saint Lucie, FL 34988	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number _	Is the claim subject to offset?	
3.80	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$17,728.48
	GLOBE SCIENTIFIC, INC	☐ Contingent	ψ17,720.40
	PO BOX 1625	☐ Unliquidated	
	Paramus, NJ 07653-1625	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
1	Last 4 digits of account number		
		Is the claim subject to offset?	
	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$4,460.00
	GONZALEZ TRADING, INC	☐ Contingent	, , , , , , , , , , , , , , , , , , , ,
	PO BOX 364884	☐ Unliquidated	
	San Juan, PR 00936-4884	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: SERVICES	
ı	Last 4 digits of account number	la the claim subject to offset?	
3.82	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	804.040.03
	GRACIELA J. BELAVAL	Confingent	\$24,343.00
	PO BOX 193785	☐ Contingent ☐ Unliquidated	
	San Juan, PR 00919-3785	☐ Disputed	
	Date(s) debt was incurred	•	
L	Last 4 digits of account number	Basis for the claim: <u>LEGAL SERVICES</u>	
	<del> </del>	is the claim subject to offset? PNo Yes	

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Deblor PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3.83 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	* * * -
GUSTOS COFFEE CO	Contingent	\$447.04
PO BOX 11277	☐ Unliquidated	
San Juan, PR 00922	☐ Disputed	
Date(s) debt was incurred		
Last 4 digits of account number	Basis for the claim: OFFICE COFFEE SUPPLIES	
	is the claim subject to offset? Mo Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$404,902.41
HALYARD SALES, LLC	☐ Contingent	7.01,002.71
PO BOX 732583	☐ Unliquidated	
Dallas, TX 75373-2583	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number _	Is the claim subject to offset?	
85 Nonpriority creditor's name and mailing address		
HALYARD SALES, LLC	As of the petition filing date, the claim is: Check all that apply.	\$1,022.22
PO BOX 732583	☐ Contingent	
Dallas, TX 75373-2583	Unliquidated	
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset?	
86 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$6,520.00
HEATHROW SCIENTIFIC, LLC	☐ Confingent	40,020.00
620 LAKEVIEW PARKWAY	☐ Unliquidated	
Vernon Hills, IL 60061	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number		
	Is the claim subject to offset?	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,984.91
HEAVY PARTS CENTER, INC	☐ Contingent	
PO BOX 3157 Bayamon, PR 00960-3157	☐ Unliquidated	
	☐ Disputed	
Date(s) debt was incurred Last 4 digits of account number	Basis for the claim: REPAIRS	
rest a digits of special trimper	ls the claim subject to offset?  No  Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$2,00
HNM MEDICAL	□ Contingent	\$2,00
20855 NE 16 AVENUE	•	
SUITE C 15	☐ Unliquidated ☐ Disputed	
Miaml, FL 33179		
Date(s) debt was incurred	Basis for the claim: <u>INVENTORY</u>	
Last 4 digits of account number	Is the claim subject to offset?  No Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$192,072.10
HOLLISTER, (NC	☐ Contingent	
72035 EAGLE WAY	☐ Unliquidated	
Chicago, IL 60678-7250	☐ Disputed	
Date(s) debt was incurred _	Basis for the claim: INVENTORY	
Last 4 digits of account number	······································	
	Is the claim subject to offset? 📕 No 🔲 Yes	

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PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3.90 Nonpriority creditor's name and mailing address HOSPITEL MFG CO PO BOX 7005 Bloomfield, NJ 07003-7005	As of the petition filing date, the claim is: Check all that apply ☐ Contingent ☐ Unliquidated ☐ Disputed	\$180.6
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset? ■ No □ Yes	
Nonpriority creditor's name and mailing address HYDROFERA, LLC 340 PROGRESS DRIVE Manchester, CT 06042	As of the petition filing date, the claim is: Check all that apply  Contingent Unliquidated Disputed	\$9,945.00
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset?	
Nonpriority creditor's name and mailing address IFCO RECYCLING, INC PO BOX 191744 San Juan, PR 00919-1744	As of the petition filling date, the claim is: Check all that apply.  Contingent Unliquidated Disputed	\$1,820.00
Date(s) debt was incurred	Basis for the claim: GARBAGE DISPOSAL	
Last 4 digits of account number	Is the claim subject to offset?	
Nonpriority creditor's name and mailing address IMMUNOSTICS, INC 38 INDUSTRIAL WAY EAST, STE 1 Eatontown, NJ 07724 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offsel?	\$539.70
3.94 Nonpriority creditor's name and mailing address IMPERIAL FASTENER CO, INC PO BOX 678 Pompano Beach, FL 33061 Date(s) debt was incurred	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed	\$180.00
Last 4 digits of account number	Basis for the claim: INVENTORY  Is the claim subject to offset? ■ No □ Yes	
Nonpriority creditor's name and mailing address INTEGRA LIFESCIENCES SALES PO BOX 404129 Atlanta, GA 30384-4129 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset?	\$107,091.61
Nonpriority creditor's name and mailing address INTEGRA LIFESCIENCES SALES PO BOX 404129 Atlanta, GA 30384-4129 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed Basis for the claim: INVENTORY	\$20,490.05
Last 4 digits of account number _	Basis for the claim: <u>INVENTORY</u> Is the claim subject to offset? ■ No ☐ Yes	

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Debtor PUERTO RICO HOSPITAL SUPPLY, INC	Case number (if known)	
3 97 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	<b>A</b> 40 040 0
INTEGRA LIFESCIENCES SALES	Contingent	\$12,619.00
PO BOX 409984		
Atlanta, GA 30384-9984	☐ Unfiquidated	
Date(s) debt was incurred_	☐ Disputed	
	Basis for the claim: INVENTORY	
Last 4 digits of account number _	Is the claim subject to offset?	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$8,136,00
INTEGRA LIFESCIENCES SALES	☐ Contingent	40,100,00
PO BOX 404129	Unliquidated	
Atlanta, GA 30384-4129	Disputed	
Date(s) debt was incurred	'	
Last 4 digits of account number	Basis for the claim: INVENTORY	
and a digital of account number	is the claim subject to offset?	
.99 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$302.80
INTEGRA LIFESCIENCES SALES	☐ Contingent	
PO BOX 404129	☐ Unliquidated	
Atlanta, GA 30384-4129	☐ Disputed	
Date(s) debt was incurred	·	
Last 4 digits of account number _	Basis for the claim: INVENTORY	
	Is the claim subject to offset? No 🔲 Yes	
100 Nonpriority creditor's name and malling address	As of the petition filing date, the claim is: Check all that apply.	\$815.00
INTEGRA RADIONICS	☐ Contingent	
PO BOX 404129	Unliquidated	
Atlanta, GA 30384-4129	☐ Disputed	
Date(s) debt was incurred _	•	
Last 4 digits of account number _	Basis for the claim: INVENTORY	
	Is the claim subject to offset?	
101 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$3,401.00
INTEGRITY MEDICAL DEVICES	☐ Contingent	
360 FAIRVIEW AVENUE	☐ Unliquidated	
Hammonton, NJ 08037	☐ Disputed	
Date(s) debt was incurred _	·	
Last 4 digits of account number	Basis for the claim: INVENTORY	
27	is the claim subject to offset? M No 🗀 Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$4,473.61
INTERSTATE ALL BATTERY	☐ Contingent	
PO BOX 363051	☐ Unliquidated	
San Juan, PR 00936-3051	☐ Disputed	
Date(s) debt was incurred _	Basis for the claim: AUTOMOBILE PARTS	
Last 4 digits of account number _		
	Is the claim subject to offset? No Tyes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$274.64
J & M DEPOT, INC	☐ Contingent	
PO BOX 29427	☐ Unliquidated	
San Juan, PR 00929-9427	☐ Disputed	
Date(s) debt was incurred _	Basis for the claim: CLEANING MATERIALS	
Last 4 digits of account number		
	Is the claim subject to offset? Me No Yes	

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Debtor	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3 104	Nonpriority creditor's name and mailing address J&J MEDICAL CARIBBEAN 475 CALLE C SUITE 200 Guaynabo, PR 00969	As of the petition filing date, the claim is: Check all that apply  Contingent Unliquidated Disputed	\$2,394,269.19
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number	Is the claim subject to offset?	
	Nonpriority creditor's name and mailing address J&J MEDICAL CARIBBEAN 475 CALLE C SUITE 200 Guaynabo, PR 00969 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filling date, the claim is: Check all that apply Contingent Unliquidated Disputed Basis for the claim: INVENTORY Is the claim subject to offset?	\$412,317.83
	Nonpriority creditor's name and mailing address J.P. TRUCK PO BOX 4811 Carolina, PR 00984 Date(s) debt was incurred Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply.  Conlingent Unliquidated Disputed  Basis for the claim: SERVICES Is the claim subject to offset?  No Yes	\$242.72
	Nonpriority creditor's name and mailing address JAIME MADURO U.S. CUSTOMS PO BOX 9022947 San Juan, PR 00902-2947 Date(s) debt was incurred _ Lest 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: PROFESSIONAL SERVICES Is the claim subject to offset?  No Yes	\$3,379.66
:	Nonpriority creditor's name and mailing address JD HOONIGBERG INTERNATIONAL 166 N PFINGSTEN ROAD SUITE 150 Deerfield, IL 60015 Date(s) debt was incurred Last 4 digits of account number _	As of the petition filling date, the claim is: Check all that apply.  Contingent Unitiquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset?	\$4,414.65
	Nonpriority creditor's name and mailing address JOHNSON & JOHNSON 475 CALLE C SUITE 200 Guaynabo, PR 00969 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset?  No Yes	\$1,960.16
	Nonpriority creditor's name and mailing address JOHNSON & JOHNSON 475 CALLE C SUITE 200 Guaynabo, PR 00969 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset?	\$301,296.20

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	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (If known)	
3 111	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	£204 c72 74
	JOHNSON & JOHNSON WOUND	☐ Contingent	\$324,673.71
	475 CALLE C SUITE 200		
	Guaynabo, PR 00969	Unliquidated	
	Date(s) debt was incurred_	☐ Disputed	
	Last 4 digits of account number	Basis for the claim: INVENTORY	
	2557 4 digits of account number _	Is the claim subject to offset? ■ No ☐ Yes	
3.112	Nonpriority creditor's name and mailing address	As of the petition filling date, the claim is: Check all that apply	\$115.00
	JOSE COLON ELEVATOR	☐ Contingent	\$115.00
	202 WALL ST	Unliquidated	
	Guaynabo, PR 00966	☐ Disputed	
	Date(s) debt was incurred	· ·	
	Last 4 digits of account number	Basis for the claim: MAINTENANCE	
	1	Is the claim subject to offset? No Yes	
3.113	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$9,847.50
	JOSON-CARE ENTERPRISE	☐ Contingent	
	IF NO 280 CHENG DU RD.	☐ Unliquidated	
	XI-TUN DISTRICT TAICHUNG CITY, TW	☐ Disputed	
	Date(s) debt was incurred_	Basis for the claim: INVENTORY	
	Last 4 digits of account number_	Is the claim subject to offset?	
3.114	Nonpriority creditor's name and mailing address	A - Fab ald - mil	
	JT POSEY CO	As of the petition filing date, the claim is: Check all that apply	\$112.56
	PO BOX 51017	☐ Contingent	
		☐ Unliquidated	
	Los Angeles, CA 90051-5317	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number	is the claim subject to offset?	
115	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$23,051.50
	KLYO MEDICAL SYSTEMS, INC	☐ Contingent	723,000
	1464 NW 82ND AVENUE	Unliquidated	
	Miami, FL 33126	Disputed	
	Date(s) debt was incurred _	·	
	Last 4 digits of account number	Basis for the claim: INVENTORY	
		Is the claim subject to offset? M No Yes	
.116	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$6,700.00
	KROMA	☐ Contingent	
	PO BOX 367304	☐ Unliquidated	
	San Juan, PR 00936-7040	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: ADVERTISING	
	Last 4 digits of account number	Is the claim subject to offset?	
117	Nonpriority creditor's name and mailing address		
		As of the petition filing date, the claim is: Check all that apply.	\$7,962.56
	LANDSCAPE CONTRACTORS	Contingent	
	PO BOX 2557	☐ Unliquidated	
	Toa Baja, PR 00951	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: LANDSCAPING	
	Last 4 digits of account number		

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Debto	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (irknown)	
3.118	Nonpriority creditor's name and mailing address	As of the notition filing date the state to the state	
	LIBERTY CABLEVISION OF PUERTO RICO	As of the petition filing date, the claim is: Check all that apply  Gontingent	\$9,122.8
	PO BOX 71496	☐ Unliquidated	
	San Juan, PR 00936-8596	_ `	
	Date(s) debt was incurred	☐ Disputed	
	Last 4 digits of account number 6827	Basis for the claim: INTERNET SERVICES	
		is the claim subject to offset? 📕 No 🔲 Yes	
3.119	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$364.00
	LLUCH FIRE & SAFETY INTL.	☐ Conlingent	700.10
	PO BOX 1016	☐ Unliquidated	
	Sabana Seca, PR 00952-1016	☐ Disputed	
	Date(s) debt was incurred _	Basis for the claim: INSPECTION	
	Last 4 digits of account number	Is the claim subject to offset? ■ No □ Yes	
	1.	is the claim subject to offset? No Li Yes	
3.120	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check ell that apply.	\$121.20
	LUCAS PRODUCTS	☐ Contingent	
	PO BOX 6570	☐ Unliquidated	
	Toledo, OH 43612	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number	Is the claim subject to offset?	
3.121	Nonpriority creditor's name and mailing address		
	LUXTEC/INTEGRA	As of the petition filing date, the claim is: Check all that apply.	\$15,911.15
	JARIT SURGICAL INSTRUMENTS	Contingent	
	PO BOX 409984	Unliquidated	
	Atlanta, GA 30384-9984	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number _	Is the claim subject to offset?	
3.122	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$2,736.79
	MADA INC	□ Contingent	Ψ2,130.13
	625 WASHINGTON AVENUE	Unliquidated	
	Caristadt, NJ 07072	☐ Disputed	
	Date(s) debt was incurred _		
	Last 4 digits of account number_	Basis for the claim: INVENTORY	
	_	is the claim subject to offset?  No  Yes	
3 123	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$9,993.36
	MAGIC TRANSPORT	☐ Contingent	
	PO BOX 360729	Unllquidated	
	San Juan, PR 00936-0729	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: FREIGHT	
	Last 4 digits of account number _	Is the claim subject to offset?	
	No. 12-years the		
404	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$842.40
3,124		☐ Contingent	
3,124	MAGMEDIX, INC	_	
1,124	160 AUTHORITY DRIVE	☐ Unliquidated	
3,124	160 AUTHORITY DRIVE Fitchburg, MA 01420	☐ Unliquidated ☐ Disputed	
3,124	160 AUTHORITY DRIVE	·	

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Debtor PUERT	O RICO HOSPITAL SUPPLY, INC.	. Case number (if known)	
	reditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	<b>.</b>
	S-GUILLERMETTY, CPA		\$34,402.0
PO BOX 3		Contingent	
San Juan,		Unliquidated	
•		☐ Disputed	
	was incurred of account number	Basis for the claim: ACCOUNTING SERVICES	
Last + digits	of account number	Is the claim subject to offset?	
	reditor's name and malling address	As of the petition filing date, the claim is: Check all that apply.	\$3,700.8
	INTERNATIONAL	☐ Contingent	40,100.0
	AUKEE ROAD	☐ Unliquidated	
SUITE 0		Disputed	
Waukesha	, WI 53188	□ Disputed	
Date(s) debt	was incurred _	Basis for the claim: INVENTORY	
Last 4 digits	of account number _	Is the claim subject to offset? Mo Yes	
127 Nonpriority c	reditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$7,449,70
MEDICAL	TECHNIQUE, INC	☐ Contingent	41,445(11
	SEARCH COURT	☐ Unliquidated	
Tucson, A	Z 85710	Disputed	
Date(s) debt v	was incurred _	•	
Last 4 digits of	of account number	Basis for the claim: INVENTORY	
	-	Is the claim subject to offset? Me No Yes	
	reditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$2,924,64
MEDLINE I	NDUSTRIES, INC	☐ Contingent	42,027,0-
DEPT CH 1	4400	□ Unliquidated	
Palatine, IL	<b>- 60055-4400</b>	Disputed	
Date(s) debt v	vas Incurred _	□ Disputed	
	of account number	Basis for the claim: INVENTORY	
	- COODIL NUMBER	is the claim subject to offset?  No  Yes	
	editor's name and malling address	As of the petition filing date, the claim is: Check all that apply	\$2,775.00
MEDPURP		☐ Contingent	
	ERS BRIDGE ROAD NW	□ Unliquidated	
SUITE 501		☐ Disputed	
Duluth, GA	30097	L) Disputed	
Date(s) debt v	vas Incurred	Basis for the claim: <u>INVENTORY</u>	
Last 4 digits of	f account number	Is the claim subject to offset? ■ No □ Yes	
	editor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,768.07
MENACO C		☐ Contingent	
PO BOX 70		☐ Unliquidated	
San Juan, I	PR 00936	☐ Disputed	
Date(s) debt w	as Incurred	Basis for the claim: INVENTORY	
Last 4 digits o	f account number		
		Is the claim subject to offset? ■ No ☐ Yes	
	editor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$85,252.30
	BIOSCIENCE CORP	☐ Contingent	,
PO BOX 63	0224	☐ Unliquidated	
Cincinnati,	OH 45263-0224	☐ Disputed	
Date(s) debt w	as incurred	·	
	f account number	Basis for the claim: INVENTORY	
		Is the claim subject to offset? 📕 No 🔲 Yes	

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Debtor	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
		As of the petition filing date, the claim is: Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed	\$82.20
	Date(s) debt was incurred _	Basis for the claim: INVENTORY	
	Last 4 digits of account number	Is the claim subject to offset?	
	Nonpriority creditor's name and mailing address MICRO DIRECT PO BOX 239 Auburn, ME 04212-0239 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: Check all that apply Contingent Unilquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes	\$60.00
	Nonpriority creditor's name and mailing address MODERN TECH ASSOCIATES CALLE WESER #144 URB. RIO PIEDRAS HEIGHTS San Juan, PR 00926 Date(s) debt was incurred	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY  Is the claim subject to offset? No Yes	\$239.44
1	Nonpriority creditor's name and mailing address MORTECH MANUFACTURING 411 N AEROJET AVENUE AZUSA, CA 91702 Date(s) debt was incurred Last 4 digits of account number	As of the patition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes	\$14,408.20
1	Nonpriority creditor's name and mailing address MULTI-SYSTEMS, INC PO BOX 191938 San Juan, PR 00919-1938 Date(a) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check ell that apply.  Contingent Uniliquidated Disputed  Basis for the claim: STORAGE Is the claim subject to offset?  No Yes	\$245.30
) ( ( ( (	Nonpriority creditor's name and mailing address MUNICIPAL REVENUE COLLECTION CENTER PO BOX 195387 San Juan, PR 00919-5387 Date(s) debt was incurred 2017 Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: PERSONAL PROPERTY TAXES	\$2,048,093.04
1 A 0	Nonpriority creditor's name and mailing address NATIONAL LIFT TRUCK SERVICE CALLE DIANA LOT 22 AMELIA INDUSTRIAL PARK Guaynabo, PR 00968 Date(s) debt was incurred	As of the petition filing date, the claim is: Check all that apply.  Contingent Uniquidated Disputed  Basis for the claim: MACHINERY RENTAL Is the claim subject to offset?	\$800.00

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Debtor	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3.139 No	npriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	****
	MF WORLD TRANSPORT INC	Contingent	\$8,340.24
	BOX 3919	<del>_</del>	
	rolina, PR 00984-3919	Unfiquidated	
	te(s) debt was incurred	☐ Disputed	
	st 4 digits of account number_	Basis for the claim: FREIGHT	
	to a digital of account humber _	Is the claim subject to offset? III No 🔲 Yes	
	npriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$21,827,80
	OMED, INC	☐ Contingent	
	0 LONDONDENY CT	□ Unliquidated	
	IITE 112	☐ Disputed	
Wc	oodstock, GA 30188	· ·	
Dat	e(s) debt was incurred _	Basis for the claim: INVENTORY	
Las	t 4 digits of account number	Is the claim subject to offset? 🌉 No 🔲 Yes	
	priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,027.44
	PTUNO MEDIA	☐ Contingent	
	BOX 191995	☐ Unliquidated	
Sai	n Juan, PR 00919-1995	☐ Disputed	
Date	e(s) debt was incurred _	Basis for the claim: SERVICES	
Las	t 4 digits of account number _		
		Is the claim subject to offset?	
	priority creditor's name and mailing address	As of the petition filling date, the claim is: Check all that apply.	\$624.40
	W CLEANING SERVICE, INC.	☐ Contingent	
	BOX 8177	☐ Unliquidated	
Bay	yamon, PR 00960-8177	Disputed	
Date	e(s) debt was incurred	Basis for the claim: CLEANING	
Last	t 4 digits of account number	is the claim subject to offset? No	
		is the claim subject to onset? No Li Yes	
	priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$6,335.00
	RO MEDICAL OF PUERTO RICO	☐ Contingent	
_	BOX 810263	☐ Unliquidated	
Car	rolina, PR 00981	☐ Disputed	
Date	i(s) debt was incurred	Basis for the claim: INVENTORY	
Last	4 digits of account number	Is the claim subject to offset? No Yes	
144		is the claim subject to disset? — NO D Yes	
	priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,481.25
NO	RTHERN ACRYLICS, INC.	☐ Contingent	
	1 WEST SUPERIOR STREET	☐ Unliquidated	
	uth, MN 55806	Disputed	
	(s) debt was incurred	Basis for the claim: INVENTORY	
Last	4 digits of account number	Is the claim subject to offset? No Yes	
446 IN	and a state of the		
	priority craditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$457.60
	VA TERRA, INC	☐ Contingent	
	BOX 142137	☐ Unliquidated	
	cibo, PR 00614-2137	☐ Disputed	
	(s) debt was incurred	Basis for the claim: GARBAGE DISPOSAL	
Last	4 digits of account number	Is the claim subject to offset?	
		is the cisim subject to onset? - No LI Yes	

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Debtor PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3 146   Nonpriority creditor's name and mailing address	As of the nation filter data the state to a	
O&M HALYARD, INC	As of the petition filing date, the claim is: Check all that apply	\$37,064.9
9120 LOCKWOOD BOULEVARD	☐ Contingent	
Mechanicsville, VA 23116	Unliquidated	
	☐ Disputed	
Date(s) debt was Incurred _	Basis for the claim: <u>INVENTORY</u>	
Last 4 digits of account number _	Is the claim subject to offset?	
147 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$3,584,78
OCASIO GATE O MATIC	☐ Conlingent	ΨΟ,004,7 (
HC 61 BOX 4594	☐ Unilquidated	
Trujillo Alto, PR 00976	☐ Disputed	
Date(s) debt was incurred _		
Last 4 digits of account number	Basis for the claim: MAINTENANCE	
	is the claim subject to offset?	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$26,087.97
OCEAN FREIGHT LINK	☐ Contingent	
3350 S.W. 148 AVE	☐ Unliquidated	
SUITE 110	☐ Disputed	
Hollywood, FL 33027-3237	Basis for the claim: FREIGHT	
Date(s) debt was incurred	Is the claim subject to offset?	
	is the claim subject to disser? — No. — 145	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,122.79
OFFICE-IT	☐ Contingent	
PMB 245 SUITE 102	☐ Unliquidated	
405 AVE. ESMERALDA	☐ Disputed	
Guaynabo, PR 00969	Basis for the claim: SUPPLIER	
Date(s) debt was incurred _ Last 4 digits of account number	Is the claim subject to offset? No Yes	
	is the stain subject to direct? — No El 168	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$569.92
OLIVER EXTERMINATING	☐ Contingent	
PO BOX 1264	☐ Unliquidated	
Caguas, PR 00726-1264	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: EXTERMINATION SERVICES	
Last 4 digits of account number _	Is the claim subject to offset?	
51 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$134.00
OMNIMED, INC	☐ Contingent	¥104,00
800 GLEN AVENUE	☐ Unliquidated	
Moorestown, NJ 08057-1122	☐ Disputed	
Date(s) debt was incurred	·	
Last 4 digits of account number _	Basis for the claim: INVENTORY	
	Is the claim subject to offset? No Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$37,848.46
ONEILL & GILMORE LAW	☐ Contingent	
262 AVENUE PONCE DE LEON	Unliquidated	
CITIBANK TOWERSM SUITE 1701	☐ Disputed	
San Juan, PR 00918	·	
Date(s) debt was incurred	Basis for the claim: LEGAL SERVICES	
Last 4 digits of account number	Is the claim subject to offset?	

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Debto	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3 153	Nonpriority creditor's name and mailing address	An of the metalon Cline date the stable to	
	ONEILL & GILMORE LAW	As of the petition filing date, the claim is: Check all that apply	\$32,464.7°
	252 AVENUE PONCE DE LEON	☐ Contingent	
	CITIBANK TOWERSM SUITE 1701	Unliquidated	
	San Juan, PR 00918	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: LEGAL SERVICES	
	Last 4 digits of account number	Is the claim subject to offset?	
3 154	The state of the s	As of the petition filing date, the claim is: Check all that apply.	\$6,076,56
	OPTIVON, INC	Contingent	\$0,U/5.50
	PO BOX 11881	Unliquidated	
	San Juan, PR 00922-1881	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: SERVICES	
	Last 4 digits of account number	Is the claim subject to offset? No Yes	
2.455	1		
3 155	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$66,123.92
	ORACLE CARIBBEAN PUERTO RICO	☐ Contingent	
	PO BOX 71436 San Juan, PR 00936-8436	Unilquidated	
	•	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: SOFTWARE	
	Last 4 digits of account number	Is the claim subject to offset?	
3.156	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	<b>A</b> 404.00
	ORACLE ELEVATOR COMPANY	☐ Contingent	\$434.86
	PO BOX 793		
	Saint Just, PR 00978	☐ Unliquidated	
	Date(a) debt was incurred _	☐ Disputed	
	Last 4 digits of account number	Basis for the claim: MAINTENANCE	
	East + digita of account noniner	Is the claim subject to offset? No 🔲 Yes	
3.157	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$4,474.77
	ORIENTAL TRUST OPERATIONS	☐ Contingent	V-)-(1-4)11
	PO BOX 191429	☐ Unliquidated	
	San Juan, PR 00919-1429	☐ Disputed	
	Date(s) debt was incurred _	,	
	Last 4 digits of account number _	Basis for the claim: SERVICES	
		Is the claim subject to offset? ■ No □ Yes	
3.158	Nonpriority creditor's name and malling address	As of the petition filing date, the claim is: Check all that apply.	\$0.50
	PAPER LAB	☐ Contingent	
	URB. COLLEGE PARK	☐ Unliquidated	
	1827 CALLE ALCALA San Juan, PR 00921-4342	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number	Is the claim subject to offset? ■ No ☐ Yes	
			<b>Am.</b>
	Nonpriority creditor's name and mailing address	As of the method filling data the state to an in our c	\$72.00
	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	
	PARI RESPIRATORY EQUIPMENT	☐ Contingent	V. 2.00
	PARI RESPIRATORY EQUIPMENT 2412 PARI WAY	☐ Contingent ☐ Unliquidated	V. 2.00
	PARI RESPIRATORY EQUIPMENT 2412 PARI WAY Midlothian, VA 23112	☐ Contingent	Ų. <b>2</b> 00
3.159	PARI RESPIRATORY EQUIPMENT 2412 PARI WAY	☐ Contingent ☐ Unliquidated	<b>V. =.vv</b>

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Debtor P	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3 160 Nonj	priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	£00.4 50
	RKER LABS, INC	Contingent	\$234.52
	ELDRIGE ROAD	☐ Unliquidated	
	field, NJ 07004	·	
	(s) debt was incurred	☐ Disputed	
	4 digits of account number_	Basis for the claim: INVENTORY	
	4 digits of account humber	Is the claim subject to offset?  No  Yes	
	priority creditor's name and mailing address	As of the petition filing date, the claim is: Chack all that apply	\$690,00
	EGRINA MEDICAL, INC	☐ Contingent	7000.00
	BOX 910	☐ Unliquidated	
Sair	nt Just, PR 00978-0910	Disputed	
Date	(s) debt was incurred _	Basis for the claim: INVENTORY	
Last	4 digits of account number	Is the claim subject to offset?	
2 402   11	-1		_
	oriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$260.00
	STAR LLC/ HEALTH O METER	☐ Conlingent	
	0 W. 55TH ST	☐ Unilquidated	
	Grange, IL 60525	☐ Disputed	
	(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4	4 digits of account number	Is the claim subject to offset?	
3.163 Nonp	priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	* 455.04
.,	NEY BOWES	Contingent	\$455.34
	BOX 11662		
	Juan, PR 00922-1662	☐ Unliquidated	
	s) debt was incurred _	LJ Disputed	
	_	Basis for the claim: POSTAL SERVICES	
- Last	4 digits of account number	ls the claim subject to offset? ■ No ☐ Yes	
3.164 Нопр	riority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$3,249.54
POP	PULAR AUTO	☐ Contingent	75,210101
PO E	BOX 15011	Unliquidated	
OLD	SAN JUAN STATION	☐ Disputed	
San	Juan, PR 00902-8511	·	
	s) debt was incurred	Basis for the claim: LEASE OF TRUCKS	
Last 4	4 digits of account number	Is the claim subject to offset?  No  Yes	
3.165 Nonp	riority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$105.49
PR C	DUST CONTROL	☐ Contingent	
PO E	3OX 360546	☐ Unliquidated	
San	Juan, PR 00936-0546	☐ Disputed	
Date(	s) debt was incurred	Basis for the claim: CLEANING	
Last 4	digits of account number		
		Is the claim subject to offset? ■ No ☐ Yes	
	riority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$89.91
	XAIR PR, INC	☐ Contingent	
	3OX 307	☐ Unliquidated	
Gura	abo, PR 00778	☐ Disputed	
Date(s	s) debt was incurred	Basis for the claim: SERVICES	
Last 4	digits of account number _	Is the claim subject to offset? No Yes	

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Debtor PUERTO RICO HOSPITAL SUPPLY,	INC. Case number (irknown)	
3.167 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	
PRECISION DYNAMICS CORP	Contingent	\$4,616.5
PO BOX 71549		
Chicago, IL 60694-1995	☐ Unliquidated	
Date(s) debt was incurred _	☐ Disputed	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset?  No  Yes	
3.169 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$5,639.60
PRECISION DYNAMICS CORP	☐ Contingent	Ψ0,000.01
PO BOX 71549	Unliquidated	
Chicago, IL 60694-1995	Disputed	
Date(s) debt was incurred	•	
Last 4 digits of account number _	Basis for the claim: INVENTORY	
	Is the claim subject to offset?  No Yes	
3.169 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$162.50
PRECISION MEDICAL INC	☐ Contingent	
300 HELD DR	☐ Unliquidated	
Northampton, PA 18067	☐ Disputed	
Date(s) debt was incurred _	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset?	
3.170 Nonpriority creditor's name and mailing address		
PREMED, LLC	As of the petition filing date, the claim is: Check all that apply.	\$8,900.00
PO BOX 474	Contingent	
Trujillo Alto, PR 00977	Unliquidated	
	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Lest 4 digits of account number	is the claim subject to offset?	
3.171 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$931.03
PRINTER REPAIR DEPOT, LLC	☐ Contingent	<b>4001.00</b>
PO BOX 364846	Unliquidated	
San Juan, PR 00936-4846	☐ Disputed	
Date(s) debt was incurred	·	
Last 4 digits of account number_	Basis for the claim: <u>REPAIRS</u>	
	ls the claim subject to offset? ■ No ☐ Yes	
3.172 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$30,348.00
PRO-FAB, INC.	☐ Contingent	
BOSQUE FARMS BLVD.	☐ Unllquidated	
Bosque Farms, NM 87068	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number		
	is the claim subject to offset?  No Yes	
3.173 Nonpriority creditor's name and malling address	As of the petition filing date, the claim is: Check all that apply.	\$316.47
PUERTO RICO DUST CONTROL	☐ Contingent	
PO BOX 362048	☐ Unliquidated	
San Juan, PR 00936-2048	Disputed	
Date(s) debt was incurred	Basis for the claim: SUPPLIER	
Last 4 digits of account number		
	Is the claim subject to offset? Mo Yes	

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Debtor	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (it known)	
3 174	Nonpriority creditor's name and mailing address PULMONARY SERVICES GROUP PO BOX 19870 San Juan, PR 00910-1870 Date(s) debt was incurred	As of the petition filing date, the claim is: Check all that apply  Contingent  Unliquidated  Disputed	\$26.25
	Last 4 digits of account number	Basis for the claim: INVENTORY	
		is the claim subject to offset?	
3.175	Nonpriority creditor's name and mailing address QUALITY WATER SERVICE PO BOX 9020096 San Juan, PR 00902 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: WATER SERVICES Is the claim subject to offset?	\$287.04
3.176	Nonpriority creditor's name and mailing address R.A.W. SECURITY SERVICES PMB 214-A PO BOX 607071 Bayamon, PR 00956 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: SECURITY SERVICES Is the claim subject to offset?	\$7,262.01
	Nonpriority creditor's name and mailing address REAL BUSINNESS 1605 AVE. PONCE DE LEON EDIF. SAN MARTIN SUITE 506 San Juan, PR 00909 Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: SERVICES Is the claim subject to offset? No Yes	\$29,107.43
	Nonpriority creditor's name and mailing address RESPIRONICS, INC PO BOX 405740 Atlanta, GA 30384-5740 Date(s) debt was incurred	As of the petition filing date, the claim is: Check all that apply.  Contingent Unilquidated Disputed  Basis for the claim: INVENTORY Is the claim subject to offset?	\$239.25
	Nonpriority creditor's name and mailing address REY ELECTRICAL SERVICES HC 73 BOX 5766 Naranjito, PR 00719 Data(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: REPAIRS AND MAINTENANCE Is the claim subject to offset?  No Yes	\$526.77
	Nonpriority creditor's name and mailing address RICOH, PR BOX 71459 San Juan, PR 00936-8559 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: Check ell that apply.  Contingent Unliquidated Disputed  Basis for the claim: OFFICE EQUIPMENT Is the claim subject to offset? No Yes	\$6,901.29

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Debtor PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3.181 Nonpriority creditor's name and mailing address RUSSIN, VECCHI & HEREDIA EL RECONDO 2 MONTE MIRADOR ENSANCHE BELLA VISTA 3ER PISO SANTO DOMINGO, DO	As of the petition filing date, the claim is: Check all that apply  Contingent Unliquidated Disputed	\$165.00
·	Basis for the claim: SERVICES	
Date(s) debt was incurred _ Last 4 digits of account number	Is the claim subject to offset? No Yes	
SAKURA FINETEK USA, INC 1750 W 214TH STREET Torrance, CA 90501	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquideted Disputed	\$12,194.00
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset?	
3.183 Nonpriority creditor's name and mailing address SALTER LABS 8399 SOLUTIONS CENTER Chicago, IL 60677-8003	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed	\$1,123.00
Date(s) debt was incurred _	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset? ■ No ☐ Yes	
3.184 Nonpriority creditor's name and mailing address SCHUERCH CORPORATION 452 RANDOLPH ST. Abington, MA 02351	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed	\$5,689.00
Date(s) debt was incurred _ Last 4 digits of account number	Basis for the claim: INVENTORY	
-	Is the claim subject to offset? PNO Yes	
3.185 Nonpriority creditor's name and mailing address SECA CORP. 13601 BENSON AVE. Chino, CA 91710 Date(s) debt was incurred _	As of the petition filing date, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim: INVENTORY	\$301.80
Last 4 digits of account number _	Is the claim subject to offset? ■ No □ Yes	
3.186 Nonpriority creditor's name and mailing address  SMART SECURITY SERVICES PO BOX 2110 Bayamon, PR 00960  Date(s) debt was incurred _	As of the petition filing date, the claim is: Check all that apply.  Contingent Unilquidated Disputed	\$100.36
Last 4 digits of account number _	Basis for the claim: MAINTENANCE  Is the claim subject to offset? ■ No □ Yes	
3.187 Nonpriority creditor's name and mailing address SMART SECURITY SERVICES PO BOX 50986 LEVITTOWN STATION Toa Baja, PR 00950-0986 Date(s) debt was incurred _	As of the petition filing date, the claim is: Check all that apply.  Contingent Uniliquidated Disputed Basis for the claim: MAINTENANCE	\$575.61
Last 4 digits of account number	Is the claim subject to offset?	

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Debtor PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
3 188 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	<b></b>
SMITH MEDICAL	Contingent	\$33,035.44
PO BOX 7247	_	
Philadelphia, PA 19170-7784	☐ Unliquidated	
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset?	
3.189 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$40.470.00
SMITHS MEDICAL ASD, INC	Contingent	\$10,178.20
PO BOX 7247	Unliquidated	
Philadelphia, PA 19170-7784	☐ Disputed	
Date(s) debt was incurred	•	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	is the claim subject to offset? Mo Yes	
3.190 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$38,459.00
SMITHS MEDICAL CO	☐ Contingent	
PO BOX 7247	☐ Unliquidated	
Philadelphia, PA 19170-7784	☐ Disputed	
Date(s) debt was incurred _	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset?	
3.191 Nonpriority creditor's name and mailing address		
SPOT ON HOLD	As of the petition filing date, the claim is: Check all that apply	\$349.95
PO BOX 1836	☐ Contingent	
Mayaguez, PR 00681	Unliquidated	
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: ADVERTISING	
East 4 digits of account number	Is the claim subject to offset?	
3.192 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$8,372.50
SPS MEDICAL	☐ Contingent	Ψ0,07 <b>Σ</b> .00
6789 W. HENRIETTA ROAD	□ Unliquidated	
Rush, NY 14543	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset? ■ No ☐ Yes	
3.193 Nonpriority creditor's name and mailing address		
3.193 Nonpriority creditor's name and mailing address SS TECHOS, INC	As of the petition filing date, the claim is: Check all that apply.	\$102,083.12
PO BOX 2022	Contingent	
Trujillo Alto, PR 00977	Unliquidated	
Date(s) debt was incurred	☐ Disputed	
	Basis for the claim: REPAIRS	
Last 4 digits of account number	Is the claim subject to offset?	
3.194 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$40.040.00
STERICYCLE, INC	☐ Contingent	\$40,240.66
PO BOX 6582	☐ Unliquidated	
Carol Stream, IL 60197	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: GARBAGE DISPOSAL	
Last 4 digits of account number		
	Is the claim subject to offset? No Yes	

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PUERTO RICO HOSPITAL SUPPLY, IN	C. Case number (ir known)	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	£20,440.0
SURGICAL SPECIALTIES	Contingent	\$39,412.3
PO BOX 419407	Unliquidated	
Boston, MA 02241-9407	Disputed	
Date(s) debt was incurred	·	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset? No Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Chack all that apply.	\$237.3
SURGICAL SPECIALTIES PR	☐ Contingent	
PO BOX 823444	☐ Unliquidated	
Philadelphia, PA 19182-3444	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	is the claim subject to offset? ■ No ☐ Yes	
197 Nonpriority creditor's name and mailing address	As of the petition filling date, the claim is: Check all that apply	
SYSTEM ONE, INC		\$62.1
BOX 10567	☐ Contingent	
San Juan, PR 00922	☐ Unliquidated	
Date(s) debt was incurred _	☐ Disputed	
<del>-</del>	Basis for the claim: DATACARD	
Last 4 digits of account number	ls the claim subject to offset? ■ No □ Yes	
98 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$2.0C7.5
SYSTRONICS, INC	Contingent	\$3,067.5
PO BOX 194030	☐ Unliquidated	
CA 91940-3000	` `	
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: PRINTERS	
east 4 digits of account number	is the claim subject to offset? ■ No ☐ Yes	
199 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$3,940.20
TECHNO-AIDE, LLC	☐ Contingent	40,040.20
PO BOX 305172	☐ Unliquidated	
DEPT 96	☐ Disputed	
Nashville, TN 37230	·	
Date(s) debt was incurred _	Basis for the claim: INVENTORY	
Last 4 digits of account number _	Is the claim subject to offset?  No  Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$10,145.82
TELEFLEX MEDICAL	☐ Contingent	
PO BOX 601608	Unliquidated	
Charlotte, NC 28260-1608	Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	A STATE OF THE STA	
	Is the claim subject to offset? ■ No ☐ Yes	
01 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$10,123.83
TELEFLEX MEDICAL	☐ Contingent	•
PO BOX 601608	☐ Unliquidated	
Charlotte, NC 28260-1608	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	Is the claim subject to offset?	

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Debto	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (it known)	
3.202	Пппр		
3.202	Nonpriority creditor's name and mailing address TELEFLEX MEDICAL/CV	As of the petition filling date, the claim is: Check all that apply	\$2,857.00
	PO BOX 601608	Contingent	
	Charlotte, NC 28260-1608	Unliquidated	
		☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number	is the claim subject to offset?	
3.203	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Chack all that apply.	\$5,072.60
	TETRA MEDICAL SUPPLY CORP.	☐ Contingent	401012100
	6364 WEST GROSS POINT ROAD	Unilguidated	
	Niles, IL 60714	Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number	Is the claim subject to offset? No Yes	
3.204	Nonpriority creditor's name and mailing address		
·	THERMI FISHER SCIENTIFIC	As of the petition filing date, the claim is: Check all that apply.	\$1,199.58
	8364 VALLEY PIKE	☐ Contingent	
	Middletown, VA 22645	Unliquidated	
	Date(s) debt was incurred	☐ Disputed	
	Last 4 digits of account number_	Basis for the claim: INVENTORY	
	Table of account fidings	Is the claim subject to offset?	
3.205	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$17,286.92
	TIDI PRODUCTS, LLC	☐ Contingent	<b>417,200.32</b>
	PO BOX 776290	☐ Unliquidated	
	Chicago, IL 60677-6290	Disputed	
	Date(s) debt was incurred	·	
	Last 4 digits of account number	Basis for the claim: INVENTORY	
		Is the claim subject to offset? No Yes	
3.206	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$651.78
	TORCOS, INC PO BOX 29708	☐ Cantingent	
	San Juan, PR 00929-0708	Unflquidated	
		☐ Disputed	
	Date(s) debt was incurred Last 4 digits of account number	Basis for the claim: CLEANING MATERIALS	
	Last 4 digits of account number _	Is the claim subject to offset?	
3.207	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,612.20
	TRI-TEX ENTERPRISES	☐ Contingent	4 Harman
	4909 LAKAWANA STREET	☐ Unliquidated	
	Dallas, TX 75247	Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number	Is the claim subject to offset? ■ No □ Yes	
3,208	Nonpriority creditor's name and mailing address		
	TRIPLE S-SALUD	As of the petition filing date, the claim is: Check all that apply.	\$29,072.49
	PO BOX 71548	☐ Cantingent	
	San Juan, PR 00936-8648	Unliquidated	
	Date(s) debt was incurred _	☐ Disputed	
	Last 4 digits of account number _	Basis for the claim: HEALTH INSURANCE	

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PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (it known)	
209 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	400.000
TRUMPF MEDIZIN SUSTEME GMBH	_	\$32,682.3
PO BOX 68	☐ Contingent	
Farmington, CT 06034-0068	☐ Unliquidated	
Date(s) debt was incurred	☐ Disputed	
Last 4 digits of account number	Basis for the claim: INVENTORY	
	Is the claim subject to offset?  No  Yes	
210 Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$217.50
ULINE	☐ Contingent	<b>V</b> 2111,00
PO BOX 88741	☐ Unliquidated	
Chicago, IL 60680-1741	Disputed	
Date(s) debt was incurred	Basis for the claim: MATERIALS AND EQUIPMENT	
Last 4 digits of account number	Is the claim subject to offset? No	
	is the daim subject to offset? No Li Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$3,378.14
UNITED INSURANCE FINANCE	☐ Contingent	
PO BOX 6356	☐ Unliquidated	
San Juan, PR 00914-6356	☐ Disputed	
Date(s) debt was incurred _	Basis for the claim: INSURANCE	
Last 4 digits of account number	Is the claim subject to offset?	
212   Nonpriority creditor's name and mailing address	A - chair and any and a second	
UNITED PARCEL SERVICE	As of the petition filing date, the claim is: Check all that apply.	\$124.82
PO BOX 71594	☐ Contingent	
San Juan, PR 00936-8694	Unliquidated	
·	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: FREIGHT	
Last 4 digits of account number _	Is the claim subject to offset? ■ No ☐ Yes	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check ell that apply.	\$2,820.95
UPM GROUP	☐ Contingent	<b>V</b> 2,020.00
PO BOX 192052	Unliquidated	
San Juan, PR 00919-5052	☐ Disputed	
Date(s) debt was incurred	·	
Last 4 digits of account number _	Basis for the claim: SYSTEM MAINTENANCE	
<del>-</del>	Is the claim subject to offset?	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$1,500.00
UPR SCHOOL OF MEDICINE	☐ Contingent	
PO BOX 365067	☐ Unliquidated	
San Juan, PR 00936-5067	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: ACTIVITIES	
Last 4 digits of account number _	Is the claim subject to offset? No Yes	
Manadadh anditada		
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$428.75
VEGA MEDICAL, INC	Contingent	
PO BOX 1937	☐ Unliquidated	
Vega Baja, PR 00694-1937	☐ Disputed	
Date(s) debt was incurred	Basis for the claim: INVENTORY	
Last 4 digits of account number	Desis for the claus. HAAFIALOUT	

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3.210   Nonpriority creditor's name and mailing address	Debtor PUERTO	O RICO HOSPITAL SUPPLY, INC.	Case number (if known)	
VYAIRE MEDICAL, INC 29429 NETWORK PLACE Chicago, It. 60673-1294 Date(s) debt was incurred Basis for the claim: INVENTORY Is the claim subject to offset? Into   Yes  3.217 Nonpriority creditor's name and mailing address VYGON PO BOX 787428 Philadelphila, PA 19178-7428 Date(s) debt was incurred Basis for the claim: INVENTORY Lest 4 digits of account number Is the claim subject to offset? Into   Yes  3.218 Nonpriority creditor's name and mailing address WATERLOO HEALTHCARE PO BOX 53555 Phoenix, AZ 85072-3555 Date(s) debt was incurred Basis for the claim: INVENTORY Lest 4 digits of account number Is the delim subject to offset? Into   Yes  3.218 Nonpriority creditor's name and mailing address WATERLOO HEALTHCARE PO BOX 53555 Phoenix, AZ 85072-3555 Date(s) debt was incurred Basis for the claim: INVENTORY Lest 4 digits of account number Is the delim subject to offset? Into   Yes  3.219 Nonpriority creditor's name and mailing address WELLS JOHNSON COMPANY BOOS & KOLB ROAD TUGGON, AZ 850756 Date(s) debt was incurred Basis for the claim: INVENTORY Lest 4 digits of account number Is the claim subject to offset? Into   Yes  3.210 Nonpriority creditor's name and mailing address WESTMED, INC Undiquidated Date(s) debt was incurred Basis for the claim: INVENTORY Lest 4 digits of account number  1.220 Nonpriority creditor's name and mailing address WESTMED, INC WESTMED, INC WESTMED, INC Undiquidated Date(s) debt was incurred Basis for the claim: INVENTORY Lest 4 digits of account number  1.221 Nonpriority creditor's name and mailing address WESTMED, INC Undiquidated Date(s) debt was incurred Basis for the claim: INVENTORY Lest 4 digits of account number Section of the claim: INVENTORY Lest Claim Line Claim and Inventory Lest 4 digits of account number Lest 4 digits of account number Lest 4 digits of account number Lest 4 digits of	3 216 Nonpriority c	reditor's name and mailing address	At of the notition filling date the state to see a second	_
29423 NETWORK PLACE Chicago, IL 69573-1294 Dato(s) debt was incurred Lest 4 digits of account number Lest 4 digits of account				\$8,241.20
Chicago, IL 60673-1294 Date(s) dabt was incurred				
Date(s) debt was incurred			Unliquidated	
Last 4 digits of account number			☐ Disput <del>e</del> d	
Last 4 clights of account number   Is the claim subject to offset?   No   Yes    3.217 Nonpriority creditor's name and mailling address   As of the petition filling date, the claim is: Check all that apply   \$6,884.00    YGON   Confingent   Confingent   Confingent   Confingent   Confingent    Date(s) abobt was incurred   Basis for the claim: INVENTORY    Is the claim subject to offset?   No   Yes    3.218 Nonpriority creditor's name and mailling address   WATERLOO HEALTHCARE   Confingent    PO BOX 53555   Confingent   Confingent    Date(s) abobt was incurred   Basis for the claim: INVENTORY    Is the claim subject to offset?   No   Yes    3.219 Nonpriority creditor's name and mailling address   WELLS JOHNSON COMPANY   Confingent    Date(s) debt was incurred   Basis for the claim: INVENTORY    Is the claim subject to offset?   No   Yes    3.220 Nonpriority creditor's name and mailling address   WELLS JOHNSON COMPANY   Confingent    Date(s) debt was incurred   Basis for the claim: INVENTORY    Is the claim subject to offset?   No   Yes    3.220 Nonpriority creditor's name and mailling address   WESTMED, INC   Confingent    Date(s) debt was incurred   Basis for the claim: INVENTORY    Is the claim subject to offset?   No   Yes    3.220 Nonpriority creditor's name and mailling address   WESTMED, INC   Confingent    Date(s) debt was incurred   Basis for the claim: INVENTORY    Is the claim subject to offset?   No   Yes    3.221 Nonpriority creditor's name and mailling address   WESTMED, INC   Confingent    Uniquidated   Date(s) debt was incurred   Basis for the claim: INVENTORY    Is the claim subject to offset?   No   Yes    3.222 Nonpriority creditor's name and mailling address   WESTMED, INC   Confingent    Uniquidated   Date(s) debt was incurred   Basis for the claim: INVENTORY    Is the claim subject to offset?   No   Yes    3.223 Nonpriority creditor's name and mailling address   WESTMED, INC   Confingent    Uniquidated   Disputed    Date(s) debt was incurred   Basis for the claim: INVENTORY    Is the claim su			Basis for the claim: INVENTORY	
VYGON PO BOX 787428 PNIadelphia, PA 19178-7428 Date(s) debt was incurred Lest 4 digits of account number  Sals for the claim: INVENTORY is the claim subject to offset? ■ no	Last 4 digits	of account number_	41111	
VYGON PO BOX 787426 Philadelphia, PA 19178-7426 Date(s) debt was incurred Lest 4 digits of account number  Lest 4 digits of account number Lest 4 digits of a		reditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$6 684 00
PO BOX 18 /428 Philadelphila, PA 19178-7426 Date(s) debt was incurred Lest 4 digits of account number Lest 4 digits of account number    Sales for the claim:   INVENTORY    Is the claim subject to offset?   No   Yes				
Disputed   Date(s) dobt was incurred   Basts for the claim: INVENTORY   Is the claim subject to offset?   No   Yes				
Date(s) debt was incurred Last 4 digits of account number Last 4 digits of account number    Nonpriority creditor's name and mailing address   San of the patition filing date, the claim is: Check all that apply   \$333.70	Philadelph	ia, PA 19178-7426		
Sat A digits of account number   Is the claim subject to offset?   No   Yes	Date(s) debt v	vas Incurred	·	
Section   Sect	Last 4 digits o	of account number		
WATERLOO HEALTHCARE PO BOX 53555 Phoenix, AZ 85072-3555 Date s) debt was incurred Last 4 digits of account number		· · ·	Is the claim subject to offset? No Yes	
WELLS JOHNSON COMPANY 8000 S. KOLB ROAD 1.sat 4 digits of account number  WELLS JOHNSON COMPANY 8000 S. KOLB ROAD 1.sat 4 digits of account number  WELLS JOHNSON COMPANY 8000 S. KOLB ROAD 1.sat 4 digits of account number  WELLS JOHNSON COMPANY 8000 S. KOLB ROAD 1.sat 4 digits of account number  WELLS JOHNSON COMPANY 8000 S. KOLB ROAD 1.sat 4 digits of account number  Basis for the claim: INVENTORY Is the claim subject to offset? IN NO Yes  Nonpriority creditor's name and mailing address WESTANDON WEST			As of the petition filing date, the claim is: Check all that apply.	\$333.70
Phoenix, AZ 85072-3555  Detected betwest incurred Last 4 digits of account number Last 4 digit			☐ Contingent	75-54.6
Priceinx, AZ 85072-3555  Date(s) debt was incurred  Last 4 digits of account number  Last 4 digits of account number  WELLS JOHNSON COMPANY 8000 S. KOLB ROAD Tucson, AZ 85786  Date(s) debt was incurred Last 4 digits of account number  Basis for the claim: INVENTORY   Contingent   Inventory     Is the claim subject to offset? No   Yes  No   Yes  \$1,460.00  As of the petition filing date, the claim is: Check all that apply   \$1,460.00  WELLS JOHNSON COMPANY 8000 S. KOLB ROAD Tucson, AZ 85786   Disputed  Date(s) debt was incurred   Last 4 digits of account number   Is the claim: INVENTORY   Is the claim subject to offset? No   Yes  WESTMED, INC PO BOX 29681   Unliquidated Phoenix, AZ 85038-9681   Disputed  Date(s) debt was incurred   Last 4 digits of account number   Is the claim: INVENTORY   Is the claim: INVENTORY   Is the claim: INVENTORY     Is the claim: INVENTORY     Is the claim: INVENTORY     Is the claim: INVENTORY     Is the claim: INVENTORY     Is the claim subject to offset? No   Yes    2221 Nonpriority creditor's name and mailing address     WEXLER SURGICAL, INC.   Contingent     Unliquidated     Unli			☐ Unliquidated	
Date(s) debt was incurred Last 4 digits of account number   ls the claim subject to offset? No   Yes      Nonpriority creditor's name and mailing address   St. 460.00   Yes	Phoenix, A	Z 85072-3555		
Is the claim subject to offset? No	Date(s) debt w	vas Incurred	·	
Nonpriority creditor's name and mailing address   Softhe petition filing date, the claim is: Check all that apply   \$1,460.00	Last 4 digits o	faccount number_		
WELLS JOHNSON COMPANY 8000 S. KOLB ROAD Tucson, AZ 85756 Date(s) debt was incurred Last 4 digits of account number is the claim subject to offset? No yes  3.220 Nonpriority creditor's name and mailing address WESTMED, INC PO BOX 29661 Phoenix, AZ 85038-9661 Date(s) debt was incurred Last 4 digits of account number  Basis for the claim: INVENTORY Is the claim subject to offset? No yes  3.221 Nonpriority creditor's name and mailing address WEXLER SURGICAL, INC. 11333 CHIMNEY ROCK RD. SUITE 110 Houston, TX 77035 Date(s) debt was incurred Last 4 digits of account number Is the claim subject to offset? No yes  3.222 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  3.223 Salid Minuser Rock RD. Suite 110 Houston, TX 77035 Date(s) debt was incurred Last 4 digits of account number Is the claim subject to offset? No yes  3.222 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  4.222 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  4.222 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  4.222 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  4.222 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  4.222 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  4.222 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  4.223 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  4.224 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply.  4.225 Nonpriority creditor's name and mailing ad			Is the claim subject to offset? ■ No ☐ Yes	
WELLS JOHNSON COMPANY 8000 S. KOLB ROAD Tucson, AZ 85786  Date(s) debt was incurred Last 4 digits of account number  WESTMED, INC PO BOX 29861 Phoenix, AZ 85038-9661 Date(s) debt was incurred Last 4 digits of account number  Basis for the claim: INVENTORY Is the claim subject to offset? No yes  Nonpriority creditor's name and mailing address WESTMED, INC PO BOX 29861 Phoenix, AZ 85038-9661 Date(s) debt was incurred Basis for the claim: INVENTORY Is the claim subject to offset? No yes  Nonpriority creditor's name and mailing address WEXLER SURGICAL, INC. 11333 CHIMMEY ROCK RD. SUITE 110 Houston, TX 77035 Date(s) debt was incurred Last 4 digits of account number  Is the claim subject to offset? No yes  Basis for the claim: INVENTORY Is the claim is: Check all that apply:  \$530.00  WEXLER SURGICAL, INC. 10 Contingent Unliquidated Disputed  Basis for the claim: INVENTORY  Is the claim subject to offset? No yes  As of the petition filling date, the claim is: Check all that apply:  \$450.00  WILFREDO PICORELLI AVENIDA ROBERTO CLEMENTE Undiquidated U			As of the petition filing date, the claim is: Check all that apply	\$1,460.00
Tucson, AZ 85756  Deto(s) debt was incurred			☐ Contingent	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Date(s) debt was incurred			☐ Unliquidated	
Date(s) debt was incurred	Tucson, AZ	2 85756	·	
Last 4 digits of account number  Is the claim subject to offset?  No	Date(s) debt w	ras Incurred _	•	
Nonpriority creditor's name and mailing address   As of the petition filing date, the claim is: Check all theil apply.   \$24,275.74	Last 4 digits o	f account number	- <del></del>	
WESTMED, INC PO BOX 29661 Phoenix, AZ 85038-9661 Date(s) debt was Incurred Last 4 digits of account number Is the claim subject to offset?  No yes  Basis for the claim: INVENTORY Is the claim subject to offset? No yes  WEXLER SURGICAL, INC. Contingent Unliquidated			is the claim subject to offset? No Yes	
PO BOX 29661 Phoenix, AZ 85038-9661 Date(s) debt was incurred Last 4 digits of account number Is the claim subject to offset?  Nonpriority creditor's name and mailing address WEXLER SURGICAL, INC. 11333 CHIMNEY ROCK RD. SUITE 110 Houston, TX 77035 Date(s) debt was incurred Last 4 digits of account number  Is the claim subject to offset?  No Yes  As of the patition filing date, the claim is: Check all that apply.  \$530.00  \$530.00  VEXLER SURGICAL, INC. 10 Contingent 11333 CHIMNEY ROCK RD. 11334 Proceeding Rock all that apply. 11334 Proceeding Rock Rd. 11334 Proceeding Rd. 11334 Proceeding Rd. 11334 Proceeding Rd. 11334 Proceeding Rd. 11334			As of the petition filing date, the claim is: Check all that apply.	\$24,275.74
Phoenix, AZ 85038-9661  Date(s) debt was incurred  Last 4 digits of account number    Sazis for the claim:   INVENTORY	′	• •	☐ Contingent	
Date(s) debt was Incurred			☐ Unliquidated	
Last 4 digits of account number   Is the claim: INVENTORY   Is the claim subject to offset? No   Yes    Description   Nonpriority creditor's name and mailing address   As of the patition filing date, the claim is: Check all that apply.   \$530.00    WEXLER SURGICAL, INC.   Contingent   Unliquidated   Unliquidated	Phoenix, A	Z 85038-9661	_ `	
Sthe claim subject to offset? No Yes	Date(s) debt w	as Incurred _	Basis for the claim: INVENTORY	
Nonpriority creditor's name and mailing address  WEXLER SURGICAL, INC.  11333 CHIMNEY ROCK RD.  SUITE 110  Houston, TX 77035  Data(s) debt was incurred  Last 4 digits of account number  Wilfredo Picorelli  AVENIDA ROBERTO CLEMENTE  #D-1  Carolina, PR 00985  Date(s) debt was incurred  Disputed  As of the petition filing date, the claim is: Check all that apply.  \$530.00  \$530.00  Contingent  Unliquidated  Contingent  Unliquidated  Unliquidated  Disputed  Basis for the claim: LEGAL SERVICES	Last 4 digits of	f account number		
WEXLER SURGICAL, INC.  11333 CHIMNEY ROCK RD.  SUITE 110  Houston, TX 77035  Data(s) debt was Incurred  Last 4 digits of account number  Is the claim subject to offset?  No Yes  As of the petition filing date, the claim is: Check all that apply.  WILFREDO PICORELLI  AVENIDA ROBERTO CLEMENTE  #D-1  Carolina, PR 00985  Date(s) debt was incurred    Contingent   Unliquidated     Unliquidated     Disputed     Disputed     Disputed     Disputed     Disputed     Disputed     Date(s) debt was incurred     LEGAL SERVICES	Nonpriority cre	editor's name and mailing address		<b>A</b>
11333 CHIMNEY ROCK RD. SUITE 110 Houston, TX 77035 Data(s) debt was incurred Last 4 digits of account number Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply.  WILFREDO PICORELLI AVENIDA ROBERTO CLEMENTE #D-1 Carolina, PR 00985 Date(s) debt was incurred  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply.  \$450.00 Unliquidated Unliquidated Disputed  Basis for the claim: LEGAL SERVICES		<del>-</del>	_	\$530.00
SUITE 110 Houston, TX 77035 Data(s) debt was incurred Last 4 digits of account number Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply.  WILFREDO PICORELLI AVENIDA ROBERTO CLEMENTE #D-1 Carolina, PR 00985 Date(s) debt was incurred  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: Check all that apply.  \$450.00  Unliquidated Disputed  Disputed			_	
Houston, TX 77035 Data(s) debt was Incurred Last 4 digits of account number Is the claim subject to offset?  Nonpriority creditor's name and mailing address WILFREDO PICORELLI AVENIDA ROBERTO CLEMENTE #D-1 Carolina, PR 00985 Date(s) debt was incurred  Disputed  Basis for the claim: INVENTORY Is the claim subject to offset? No Yes  450.00  Contingent Unliquidated Disputed  Basis for the claim: LEGAL SERVICES		MET ROOK ND.	Unliquidated	
Date(s) debt was incurred		X 77035	☐ Disputed	
Last 4 digits of account number	•		Basis for the claim: INVENTORY	
WILFREDO PICORELLI  AVENIDA ROBERTO CLEMENTE  #D-1  Carolina, PR 00985  Date(s) debt was incurred _  Contingent  Unliquidated  Disputed  Basis for the claim: LEGAL SERVICES			Is the claim subject to offset?  No  Yes	
WILFREDO PICORELLI  AVENIDA ROBERTO CLEMENTE  #D-1  Carolina, PR 00985  Date(s) debt was incurred _  Contingent  Unliquidated  Disputed  Basis for the claim: LEGAL SERVICES	Nonpriority cre	ditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	\$450.00
AVENIDA ROBERTO CLEMENTE  #D-1 Carolina, PR 00985  Date(s) debt was incurred _  Canolina			_	\$750.UU
#D-1 Carolina, PR 00985  Date(s) debt was incurred				
Date(s) debt was incurred _ Basis for the claim: <u>LEGAL SERVICES</u>			_ •	
Date(s) debt was incurred		₹ 00985	☐ Disputed	
-EL20	·		Basis for the claim: LEGAL SERVICES	
100 miles of angular unitable		<b>-</b>	is the daim subject to offset?	
	Last 4 digits of	account number	is the claim subject to offset? No Li Yes	

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Debtor	PUERTO RICO HOSPITAL SUPPLY, INC.	Case number (i/ known)	
3 223	Nonpriority creditor's name and mailing address WINCO, INC	As of the petition filing date, the claim is: Check all that apply  Contingent	\$5,951.34
	5516 SW FIRST LANE Ocala, FL 34474	☐ Unfiquidated	
	·	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number _	Is the claim subject to offset?	
	Nonpriority creditor's name and mailing address	As of the petition filling date, the claim is: Check all that apply	\$3,504.40
	WOLF X-RAY CORP	☐ Contingent	44,004,40
	100 WEST INDUSTRY COURT	☐ Unliquidated	
	Deer Park, NY 11729	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: INVENTORY	
	Last 4 digits of account number	Is the claim subject to offset?	
3.225	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply	
	YOKOGAWA CORP OF AMERICA	Contingent	\$2,670.00
	2 DART ROAD	☐ Unliquidated	
	Newnan, GA 30265	☐ Disputed	
	Date(s) debt was incurred _	•	
	Last 4 digits of account number	Basis for the claim: SERVICES	
		Is the claim subject to offset? No 🔲 Yes	
	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$57,926.03
	YOLANDA BENITEZ, COTTO	☐ Contingent	
	CITY TOWERS SUITE 802 San Juan, PR 00918	☐ Unliquidated	
	· ·	☐ Disputed	
	Date(s) debt was incurred	Basis for the claim: LEGAL SERVICES	
'	Last 4 digits of account number	Is the claim subject to offset?	
D	The control of the co		
Part 3:	List Others to Be Notified About Unsecured Clair		
4. List In a	alphabetical order any others who must be notified for cla ses of claims listed above, and attorneys for unsecured credito	Ims listed in Parts 1 and 2. Examples of entities that may be listed are rs.	collection agencies,
if no ot	thers need to be notified for the debts listed in Parts 1 and	2, do not fill out or submit this page. If additional pages are neede	d, copy the next page.
ı	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
Part 4:	Total Amounts of the Priority and Nonpriority Un	secured Claims	
5. Add th	e amounts of priority and nonpriority unsecured claims.		
5a. Total	claims from Part 1	Total of claim amounts	
	claims from Part 2	5a. \$ 915,59 5b. + \$ 12,788,99	
		55. + \$ 12,788,99	3.57
	of Parts 1 and 2	. 40 904	507.40
Lines	1 5a + 5b = 5c.	5c. \$ 13,704,	201.12

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Debtor name PUERTO RICO HOSPIT		
	DISTRICT OF PUERTO RICO	☐ Check if this is an
Case number (if known):		amended filing

#### Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	indicate if claim is contingent, unliquidated, or disputed	Amount of claim  If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or satoff to calculate unsecured claim.			
		and government contracts)		Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim	
3M DE PR, INC. PO BOX 70286 San Juan, PR 00936		INVENTORY			o control of scott	\$106,068.92	
ADVANCED MEDICAL DESIGNS 1241 ATLANTA INDUSTRIAL DRIVE Marietta, GA 30066		INVENTORY				\$105,245.60	
B BRAUN 824 TWELFTH AVE Bethlehem, PA 18018		INVENTORY				\$1,038,031.64	
BD DIAGNOSTICS 21588 NETWORK PLACE Chicago, IL 60673-1215		INVENTORY				\$495,752.07	
BD MEDICAL SURGICAL SYSTEMS PO BOX 70942 Chicago, IL 60673-0942		INVENTORY				\$857,165.59	
BD MICROBIOLOGY SYSTEM PO BOX 70942 Chicago, IL 60673		INVENTORY				\$199,299.20	
BSN MEDICAL, INC PO BOX 751766 Charlotte, NC 28275-1766		INVENTORY				\$158,449.67	
CARESTREAM HEALTH PUERTO RICO PO BOX 70231 San Juan, PR 00936-8231		INVENTORY				\$905,081.01	

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Debtor PUERTO RICO HOSPITAL SUPPLY, INC.

Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services.	Indicate If claim is contingent, unliquidated, or disputed	If the claim is fully unsecured, fill in only unsecured claim amount, if			
				Total claim, if partially secured		Unsecured claim	
CASELLAS ALCOVER & BURGOS PO BOX 364924 San Juan, PR 00936-4924		PROFESSIONAL SERVICES				\$284,909.81	
DJ ORTHOPEDICS/ENC ORE PO BOX 650777 Dallas, TX 75265-0777		INVENTORY				\$203,248.14	
HALYARD SALES, LLC PO BOX 732583 Dallas, TX 75373-2583		INVENTORY				\$404,902.41	
HOLLISTER, INC 72035 EAGLE WAY Chicago, IL 60678-7250		INVENTORY				\$192,072.10	
INTEGRA LIFESCIENCES SALES PO BOX 404129 Atlanta, GA 30384-4129		INVENTORY				\$107,091.61	
J&J MEDICAL CARIBBEAN 475 CALLE C SUITE 200 Guaynabo, PR 00969		INVENTORY				\$412,317.83	
J&J MEDICAL CARIBBEAN 475 CALLE C SUITE 200 Guaynabo, PR 00969		INVENTORY				\$2,394,269.19	
JOHNSON & JOHNSON 475 CALLE C SUITE 200 Guaynabo, PR 00969		INVENTORY				\$301,296.20	
JOHNSON & JOHNSON WOUND 475 CALLE C SUITE 200 Guaynabo, PR 00969		INVENTORY				\$324,673.71	

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Debtor PUERTO RICO HOSPITAL SUPPLY, INC.

Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim  If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.			
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim	
MUNICIPAL REVENUE COLLECTION CENTER PO BOX 195387 San Juan, PR 00919-5387		PERSONAL PROPERTY TAXES				\$2,048,093.04	
MUNICIPAL REVENUE COLLECTION CENTER PO BOX 195387 San Juan, PR 00919-5387		PERSONAL PROPERTY TAXES				\$915,593.55	
SS TECHOS, INC PO BOX 2022 Trujillo Alto, PR 00977		REPAIRS				\$102,083.12	

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### United States Bankruptcy Court District of Puerto Rico

		District of 1 der to 14160		
In re	PUERTO RICO HOSPITAL SUPPLY, INC.		Case No.	
		Debtor(s)	Chapter	11

#### **VERIFICATION OF CREDITOR MATRIX**

I, the PRESIDENT of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: 02/26/2019

211M Prest day T

FELIX B. SANTOS/PRESIDENT

Signer/Title

PUERTO RICO HOSPITAL SUPPLY, INCACCU-SCOPE INC CALL BOX 158 73 MALL DR.

CAROLINA, PR 00986-0158 COMMACK, NY 11725 AMERICAN 3B SCIENTIFIC 2189 FLINTONE DRIVE SUITE 0 TUCKER, GA 30084

ALEXIS FUENTES-HERNANDEZ FUENTES LAW OFFICES PO BOX 90227266 SAN JUAN, PR 00902-2726

ADLINK, INC PO BOX 362884 SAN JUAN, PR 00936-2884

AMERICAN DIAGNOSTIC CORP 55 COMMERCE DR. HAUPPAUGE, NY 11788

3B MEDICAL, INC 799 OVERLOOK DR WINTER HAVEN, FL 33884

ADP, INC PO BOX 842854 BOSTON, MA 02284-2854

**AMSINO** 708 CORPORATE CENTER DR. POMONA, CA 91768

3M CORPORATE PO BOX 844127 DALLAS, TX 75284-4127

ADVANCED FIRE PROTECTION PO BOX 3971 CAROLINA, PR 00984-3971

ANSELL HEALTHCARE PRODUCT **DEPT CH 17373** PALATINE, IL 60055-7373

3M DE PR, INC. PO BOX 70286 SAN JUAN, PR 00936

ADVANCED MEDICAL DESIGNS 1241 ATLANTA INDUSTRIAL DRIVE MARIETTA, GA 30066

ANSELL SANDEL MEDICAL 19736 DEARBORN STREET CHATSWORTH, CA 91311

A.A.A. PO BOX 766 SAN JUAN, PR 00916-7060 AGROPHARMA LABS PO BOX 1150 SALINAS, PR 00751

AQUA-GULD X-PRESS CALLE ALDEA #1258 **EDIFICIO UNICA SUITE 300** SAN JUAN, PR 00907

A.A.A. PO BOX 70101 SAN JUAN, PR 00936-8101 ALCOR SCIENTIC, INC 20 THURBER BOULEVARD SMITHFIELD, RI 00291-7000 ASPEN SURGICAL PRODUCTS 3998 RELIABLE PARKWAY CHICAGO, IL 60686-0039

A.E.E. PO BOX 363508 SAN JUAN, PR 00936-3508

SAN JUAN, PR 00924

ALPHA SCIENTIFIC CORP PO BOX 725 SOUTHEASTERN, PA 19399

AT&T MOBILITY PO BOX 6463 CAROL STREAM, IL 60197-6463

AC TECHNICAL SERVICES CORP URB. COUNTRY CLUB 803 CALLE MOLUCAS (AVE ITURREGUI)SAN JUAN, PR 00919-5598

ALVARADO TAX & BUSINESS PO BOX 195598

AT&T MOBILITY PUERTO RICO PO BOX 70261 SAN JUAN, PR 00936-8261

AVALON PAPERS, LLC PO BOX 3967 OSHKOSH, WI 54903-3967

BMF, INC PO BOX 277 CAGUAS, PR 00725-0277

CAREFUSION CORP 25146 NETWORK PLACE CHICAGO, IL 60673

AVANOS MEDICAL, INC 5405 WINDWARD PARKWAY SUITE 100 SOUTH ALPHARETTA, GA 30004

BOVIE MEDICAL CORPORATION 5115 ULMERTON ROAD CLEARWATER, FL 33760

CARESTREAM HEALTH PUERTOR PO BOX 70231 SAN JUAN, PR 00936-8231

B BRAUN 824 TWELFTH AVE BETHLEHEM, PA 18018

BRACCO DIAGNOSTICS INC PO BOX 978952 DALLAS, TX 75397-8952

CARIBE RECYCLING CORP PMC 20 HC-01 BOX 29030 CAGUAS, PR 00725-8900

BANCO SANTANDER DE PR PONCE DE LEON AVENUE FLOOR 7 SAN JUAN, PR 00917-1818

BRIGSS HEALTHCARE 4900 UNIVERSITY AVE SUITE 200 WEST DES MOINES, IA 50266

CARLOS R. BARALT, PSC PO BOX 195103 SAN JUAN, PR 00919-5103

BD DIAGNOSTICS 21588 NETWORK PLACE CHICAGO, IL 60673-1215

BSN MEDICAL, INC PO BOX 751766 CHARLOTTE, NC 28275-1766

CARSTENS HEALTH IND, INC PO BOX 99110 CHICAGO, IL 60693

BD MEDICAL SURGICAL SYSTEMS PO BOX 70942 CHICAGO, IL 60673-0942

CARDIAC SCIENCE CORPORATION PO BOX 776401 CHICAGO, IL 60677-6401 CASELLAS ALCOVER & BURGOS PO BOX 364924 SAN JUAN, PR 00936-4924

BD MICROBIOLOGY SYSTEM PO BOX 70942 CHICAGO, IL 60673

CARDINAL HEALTH PR 120 PO BOX 366211 SAN JUAN, PR 00936-6211 CINCINNATI SUB-ZERO 12011 MOSTELLER ROAD CINCINNATI, OH 45241

BEMIS COMPANY, INC 2200 BADGER AVENUE OSHKOSH, WI 54904 CARDINAL SCALE MFG CO 203 EAST DAUGHTERY WEBB CITY, MO 64870

COLEGIO ADM DE SERVICIOS

BIOSYNERGY, INC 1940 E DEVON AVE ELK GROVE VILLAGE, IL 60007 CARDIOPULMONARY 3002 N.W. 79 AVENUE MIAMI, FL 33166

CONE INSTRUMENTS DEPT. 2465 PO BOX 11407 BIRMINGHAM, AL 35246-2465 CONMED CORPORATION CHURCH STREET STATION PO BOX 6814 NEW YORK, NY 10249-6814

DYNAREX CORPORATION 10 GLENSHAW STREET ORANGEBURG, NY 10962

FEDERAL EXPRESS CORP PO BOX 371461 PITTSBURGH, PA 15250-7461

COOPER SURGICAL PO BOX 712280 CINCINNATI, OH 45271

ECU WORLDWIDE 2401 N.W. 69TH STREET MIAMI, FL 33147

FORDION PACKAGING LTD 637 WYCOFF AVE. #335 WYCKOFF, NJ 07481

DEPARTMENT OF TREASURY (INCOMEEJAXRANSPORT PO BOX 9024140 OFFICE 424B SAN JUAN, PR 00902-4140

EXT SANTA MARIA CALLE LIMONCILLO 17B SAN JUAN, PR 00927

FPV & GALINDEZ PO BOX 364152 SAN JUAN, PR 00936-4152

DEPARTMENT OF TREASURY (IVU) PO BOX 9024140 OFFICE 424B SAN JUAN, PR 00902-4140

EL HORREO DE V SUAREZ PO BOX 364588 SAN JUAN, PR 00936-4588

FUSIONWORKS, INC. #120 AVE CONDADO EDIFICIO PICO CENTER, SUITE 1 SAN JUAN, PR 00972-7550

DESIGN VERONIQUE 999 MARINA WAY SOUTH RICHMOND, CA 94804

**ENVISION TECHNOLOGIES** PMB 345 100 GRAN BULEVAR PASEOS SAN JUAN, PR 00926-5955

GENDRON, INC **DRAWER #1337** PO BOX 5935 TROY, MI 48007-5935

DJ ORTHOPEDICS/ENCORE PO BOX 650777 DALLAS, TX 75265-0777

ESB PUERTO RICO PO BOX 4825 CAROLINA, PR 00984-4825

GENERAL PHYSIOTHERAPY, INC 13222 LAKEFRONT DR EARTH CITY, MO 63045-1504

DLL FINANCIAL SERVICES PO BOX 41602 PHILADELPHIA, PA 19101-1602

EXIPO DESIGN CORUJO INDUSTRIAL PARK CALLE C #46 LOTE A-6 BAYAMON, PR 00961

GENSTAR TECHNOLOGIES 4525 EDISON AVE. CHINO, CA 91710

DQS MEDIZINPRODUKTE GMBH AUGUST-SCHANZ STR 21 60433 FRANKFURT A.M. FRANKFURT, DE

FACSIMILE PAPER CONN. CORP PO BOX 363122 SAN JUAN, PR 00936-3122

**GENTELL** 2701 BARTRAM RD BRISTOL, PA 19007

DUARTE WASTE PMB 1820 C/PARRIS 243 SAN JUAN, PR 00917-3632 FASHION SEAL UNIFORM PO BOX 748000 CINCINNATI, OH 45274-8000

GF HEALTH PRODUCTS, INC PO BOX 47510 ATLANTA, GA 30362-0510

GLOBAL HEALTHCARE 11350 OLD ROSWELL ROAD SUITE 700 MARIETTA, GA 30090

HNM MEDICAL 20855 NE 16 AVENUE SUITE C 15 MIAMI, FL 33179

INTEGRA RADIONICS PO BOX 404129 ATLANTA, GA 30384-4129

GLOBAL MEDICAL PRODUCTS PO BOX 881982 PORT SAINT LUCIE, FL 34988

HOLLISTER, INC 72035 EAGLE WAY CHICAGO, IL 60678-7250

INTEGRITY MEDICAL DEVICES 360 FAIRVIEW AVENUE HAMMONTON, NJ 08037

GLOBE SCIENTIFIC, INC PO BOX 1625 PARAMUS, NJ 07653-1625

HOSPITEL MFG CO PO BOX 7005 BLOOMFIELD, NJ 07003-7005 INTERNAL REVENUE SERVICE CITY VIEW PLAZA II 48 CARR 16 SUITE 200 GUAYNABO, PR 00968

GONZALFZ TRADING, INC PO BOX 364884 SAN JUAN, PR 00936-4884

HYDROFERA, LLC 340 PROGRESS DRIVE MANCHESTER, CT 06042 INTERSTATE ALL BATTERY PO BOX 363051 SAN JUAN, PR 00936-3051

GRACIELA J. BELAVAL PO BOX 193785 SAN JUAN, PR 00919-3785

IFCO RECYCLING, INC PO BOX 191744 SAN JUAN, PR 00919-1744

J & M DEPOT, INC PO BOX 29427 SAN JUAN, PR 00929-9427

GUSTOS COFFEE CO PO BOX 11277 SAN JUAN, PR 00922

IMMUNOSTICS, INC 38 INDUSTRIAL WAY EAST, STE 1 EATONTOWN, NJ 07724

J&J MEDICAL CARIBBEAN 475 CALLE C SUITE 200 GUAYNABO, PR 00969

HALYARD SALES, LLC PO BOX 732583 DALLAS, TX 75373-2583

IMPERIAL FASTENER CO, INC PO BOX 578 POMPANO BEACH, FL 33061 J.P. TRUCK PO BOX 4811 CAROLINA, PR 00984

HEATHROW SCIENTIFIC, LLC 620 LAKEVIEW PARKWAY VERNON HILLS, IL 60061

INTEGRA LIFESCIENCES SALES PO BOX 404129 ATLANTA, GA 30384-4129

JAIME MADURO U.S. CUSTOMS PO BOX 9022947 SAN JUAN, PR 00902-2947

HEAVY PARTS CENTER, INC PO BOX 3157 BAYAMON, PR 00960-3157

INTEGRA LIFESCIENCES SALES PO BOX 409984 ATLANTA, GA 30384-9984 JD HOONIGBERG INTERNATIONA 155 N PFINGSTEN ROAD SUITE 150 DEERFIELD, IL 60015 JOHNSON & JOHNSON 475 CALLE C SUITE 200 GUAYNABO, PR 00969

LLUCH FIRE & SAFETY INTL. PO BOX 1016 SABANA SECA, PR 00952-1016

MEDLINE INDUSTRIES, INC **DEPT CH 14400** PALATINE, IL 60055-4400

JOHNSON & JOHNSON WOUND 475 CALLE C SUITE 200 GUAYNABO, PR 00969

LUCAS PRODUCTS PO BOX 6570 TOLEDO, OH 43612

MEDPURPOSE, INC. 3883 ROGERS BRIDGE ROAD NW SUITE 501 **DULUTH, GA 30097** 

JOSE COLON ELEVATOR 202 WALL ST GUAYNABO, PR 00966

LUXTEC/INTEGRA JARIT SURGICAL INSTRUMENTS PO BOX 409984 ATLANTA, GA 30384-9984

PO BOX 70183 SAN JUAN, PR 00936

MENACO CORP

JOSON-CARE ENTERPRISE IF NO 280 CHENG DU RD. XI-TUN DISTRICT TAICHUNG CITY, TW

MADA INC 625 WASHINGTON AVENUE CARLSTADT, NJ 07072

MERIDIAN BIOSCIENCE CORP PO BOX 630224 CINCINNATI, OH 45263-0224

JT POSEY CO PO BOX 51017 LOS ANGELES, CA 90051-5317 MAGIC TRANSPORT PO BOX 360729 SAN JUAN, PR 00936-0729

METRO INTERNATIONAL CORP 75 REMITTANCE DRIVE **DEPT. 3044** CHICAGO, IL 60675-3044

KLYO MEDICAL SYSTEMS, INC 1464 NW 82ND AVENUE MIAMI, FL 33126

MAGMEDIX, INC 160 AUTHORITY DRIVE FITCHBURG, MA 01420

MICRO DIRECT PO BOX 239 AUBURN, ME 04212-0239

**KROMA** PO BOX 367304 SAN JUAN, PR 00936-7040 MARQUES-GUILLERMETTY, CPA PO BOX 366067 SAN JUAN, PR 00936

MODERN TECH ASSOCIATES CALLE WESER #144 URB. RIO PIEDRAS HEIGHTS SAN JUAN, PR 00926

LANDSCAPE CONTRACTORS PO BOX 2557 TOA BAJA, PR 00951

MEDICAL INTERNATIONAL 1900 PEWAUKEE ROAD SUITE 0 WAUKESHA, WI 53188

MORTECH MANUFACTURING 411 N AEROJET AVENUE AZUSA, CA 91702

LIBERTY CABLEVISION OF PUERTO RIOMEDICAL TECHNIQUE, INC PO BOX 71496 SAN JUAN, PR 00936-8596

8060 E. RESEARCH COURT TUCSON, AZ 85710

MULTI-SYSTEMS, INC PO BOX 191938 SAN JUAN, PR 00919-1938 MUNICIPAL REVENUE COLLECTION CENTERA TERRA, INC PO BOX 195387 PO BOX 142137

SAN JUAN, PR 00919-5387 ARECIBO, PR 00614-2137

3OX 142137 PO BOX 71436 CIBO, PR 00614-2137 SAN JUAN, PR 00936-8436

MUNICIPIO DE FAJARDO PO BOX 7346 APARTADO 865 FAJARDO, PR 00738

O&M HALYARD, INC 9120 LOCKWOOD BOULEVARD MECHANICSVILLE, VA 23116 ORACLE ELEVATOR COMPANY PO BOX 793 SAINT JUST, PR 00978

ORACLE CARIBBEAN PUERTO R

NATIONAL LIFT TRUCK SERVICE CALLE DIANA LOT 22 AMELIA INDUSTRIAL PARK GUAYNABO, PR 00968

OCASIO GATE O MATIC HC 61 BOX 4594 TRUJILLO ALTO, PR 00976 ORIENTAL TRUST OPERATIONS PO BOX 191429 SAN JUAN, PR 00919-1429

NEMF WORLD TRANSPORT INC PO BOX 3919

CAROLINA, PR 00984-3919 3350

OCEAN FREIGHT LINK 3350 S.W. 148 AVE SUITE 110 HOLLYWOOD, FL 33027-3237 PAPER LAB URB. COLLEGE PARK 1827 CALLE ALCALA SAN JUAN, PR 00921-4342

NEOMED, INC 100 LONDONDENY CT SUITE 112

WOODSTOCK, GA 30188

OFFICE-IT PMB 245 SUITE 102 405 AVE. ESMERALDA GUAYNABO, PR 00969 PARI RESPIRATORY EQUIPMENT 2412 PARI WAY MIDLOTHIAN, VA 23112

NEPTUNO MEDIA PO BOX 191995 SAN JUAN, PR 00919-1995

OLIVER EXTERMINATING PO BOX 1264 CAGUAS, PR 00726-1264 PARKER LABS, INC 286 ELDRIGE ROAD FAIRFIELD, NJ 07004

NEW CLEANING SERVICE, INC. PO BOX 8177

BAYAMON, PR 00960-8177

OMNIMED, INC 800 GLEN AVENUE MOORESTOWN, NJ 08057-1122 PELEGRINA MEDICAL, INC PO BOX 910 SAINT JUST, PR 00978-0910

NIPRO MEDICAL OF PUERTO RICO PO BOX 810263 CAROLINA, PR 00981

ONEILL & GILMORE LAW
252 AVENUE PONCE DE LEON
CITIBANK TOWERSM SUITE 1701
SAN JUAN, PR 00918

PELSTAR LLC/ HEALTH O METE 9500 W. 55TH ST LA GRANGE, IL 60525

NORTHERN ACRYLICS, INC. 2321 WEST SUPERIOR STREET DULUTH, MN 55806

OPTIVON, INC PO BOX 11881 SAN JUAN, PR 00922-1881 PITNEY BOWES PO BOX 11662 SAN JUAN, PR 00922-1662

POPULAR AUTO PUERTO RICO DUST CONTROL SAKURA FINETEK USA, INC PO BOX 15011 PO BOX 362048 1750 W 214TH STREET OLD SAN JUAN STATION SAN JUAN, PR 00936-2048 TORRANCE, CA 90501 SAN JUAN, PR 00902-8511 PR DEPARMENT OF LABOR PULMONARY SERVICES GROUP SALTER LABS PO BOX 195540 PO BOX 19870 8399 SOLUTIONS CENTER SAN JUAN, PR 00919-5540 SAN JUAN, PR 00910-1870 CHICAGO, IL 60677-8003 PR DUST CONTROL QUALITY WATER SERVICE SCHUERCH CORPORATION PO BOX 360546 PO BOX 9020096 452 RANDOLPH ST. SAN JUAN, PR 00936-0546 SAN JUAN, PR 00902 ABINGTON, MA 02351 PRAXAIR PR, INC. R.A.W. SECURITY SERVICES SECA CORP. PO BOX 307 PMB 214-A 13601 BENSON AVE. **GURABO, PR 00778** PO BOX 607071 CHINO, CA 91710 BAYAMON, PR 00956 PRECISION DYNAMICS CORP **REAL BUSINNESS** SMART SECURITY SERVICES PO BOX 71549 1605 AVE. PONCE DE LEON PO BOX 2110 CHICAGO, IL 60694-1995 EDIF. SAN MARTIN SUITE 506 BAYAMON, PR 00960 SAN JUAN, PR 00909 PRECISION MEDICAL INC RESPIRONICS, INC. SMART SECURITY SERVICES 300 HELD DR PO BOX 405740 PO BOX 50986 NORTHAMPTON, PA 18067 ATLANTA, GA 30384-5740 LEVITTOWN STATION TOA BAJA, PR 00950-0986 PREMED, LLC REY ELECTRICAL SERVICES SMITH MEDICAL PO BOX 474 HC 73 BOX 5766 PO BOX 7247 TRUJILLO ALTO, PR 00977 NARANJITO, PR 00719 PHILADELPHIA, PA 19170-7784 PRINTER REPAIR DEPOT, LLC RICOH. PR SMITHS MEDICAL ASD, INC. PO BOX 364846 BOX 71459 PO BOX 7247 SAN JUAN, PR 00936-4846 SAN JUAN, PR 00936-8559 PHILADELPHIA, PA 19170-7784

RUSSIN, VECCHI & HEREDIA

SANTO DOMINGO, DO

EL RECONDO 2 MONTE MIRADOR

ENSANCHE BELLA VISTA 3ER PISO

SMITHS MEDICAL CO

PHILADELPHIA, PA 19170-7784

PO BOX 7247

PRO-FAB, INC.

BOSQUE FARMS BLVD.

BOSQUE FARMS, NM 87068

SPOT ON HOLD PO BOX 1836 MAYAGUEZ, PR 00681

TECHNO-AIDE, LLC PO BOX 305172 DEPT 96 NASHVILLE, TN 37230

PO BOX 68 **FARMINGTON, CT 06034-0068** 

TRUMPF MEDIZIN SUSTEME GM

SPS MEDICAL 6789 W. HENRIETTA ROAD RUSH, NY 14543

TELEFLEX MEDICAL PO BOX 601608 CHARLOTTE, NC 28260-1608

ULINE PO BOX 88741 CHICAGO, IL 60680-1741

SS TECHOS, INC PO BOX 2022 TRUJILLO ALTO, PR 00977

TELEFLEX MEDICAL/CV PO BOX 601608 CHARLOTTE, NC 28260-1608

UNITED INSURANCE FINANCE PO BOX 6356 SAN JUAN, PR 00914-6356

PO BOX 365028 SAN JUAN, PR 00936-5028

STATE INSURANCE FUND CORPORATIONETRA MEDICAL SUPPLY CORP. 6364 WEST GROSS POINT ROAD NILES, IL 60714

UNITED PARCEL SERVICE PO BOX 71594 SAN JUAN, PR 00936-8694

STERICYCLE, INC. PO BOX 6582 CAROL STREAM, IL 60197

THERMI FISHER SCIENTIFIC 8364 VALLEY PIKE MIDDLETOWN, VA 22645

UPM GROUP PO BOX 192052 SAN JUAN, PR 00919-5052

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